

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE**

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In re:	)	
	)	Chapter 11
	)	
TRITEK INTERNATIONAL INC., <i>et al.</i> , <sup>1</sup>	)	Case No. 23-10520 (TMH)
	)	
Debtors.	)	(Jointly Administered)
	)	

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**SCHEDULES OF ASSETS AND LIABILITIES FOR  
HYLIFE FOODS WINDOM, LLC  
(CASE NO. 23-10521)**

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<sup>1</sup> The Debtors in these Chapter 11 Cases, along with the last four digits of each Debtor's federal tax identification number are: Trittek International Inc. (7919); HyLife Foods Windom, LLC (5391); and Canwin Farms, LLC (3973). Debtors' mailing address is 2850 Highway 60 East, Windom, MN 56101.

**IN THE UNITED STATES BANKRUPTCY COURT  
DISTRICT OF DELAWARE**

**In re:**

**TRITEK INTERNATIONAL INC., *et al.*,<sup>1</sup>**

**Debtors.**

)  
) **Chapter 11**  
)  
) **Case No. 23-10520 (TMH)**  
)  
) **(Jointly Administered)**  
)

**GLOBAL NOTES AND STATEMENTS OF LIMITATIONS, METHODOLOGY,  
AND DISCLAIMERS REGARDING DEBTORS' SCHEDULES OF ASSETS  
AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS**

Tritek International Inc., and its affiliated debtors and debtors in possession in the above-captioned cases (collectively, “Debtors”), are filing their respective Schedules of Assets and Liabilities (each, a “Schedule” and, collectively, the “Schedules”) and Statements of Financial Affairs (each, a “Statement”) and, collectively, the “Statements,” and together with the Schedules, the “Schedules and Statements”) in the United States Bankruptcy Court for the District of Delaware (the “Court”) pursuant to section 521 of title 11 of the United States Code (the “Bankruptcy Code”) and Rule 1007 of the Federal Rules of Bankruptcy Procedures (the “Bankruptcy Rules”).

These Global Notes and Statements of Limitations, Methodology, and Disclaimers Regarding Debtors’ Schedules of Assets and Liabilities and Statements of Financial Affairs (collectively, the “Global Notes”) pertain to, and are incorporated by reference in, and comprise an integral part of the Schedules and Statements and should be referred to and considered in connection with any review of them. In the event that the Schedules and/or Statements differ from the Global Notes, the Global Notes control. The Global Notes are in addition to the specific notes set forth below with respect to the Schedules and Statements (the “Specific Notes” and, together with the Global Notes, the “Notes”). These Notes should be referred to, and referenced in connection with, any review of the Schedules and Statements.

Debtors and their past or present directors, officers, employees, attorneys, professionals and agents do not guarantee or warrant the accuracy, completeness, or currentness of the data that is provided herein and shall not be liable for any loss or injury arising out of or caused in whole or in part by the acts, errors or omissions, whether negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating or delivering the information contained herein. Debtors and their past or present officers, employees, attorneys, professionals and agents expressly do not undertake any obligation to update, modify, revise or re-categorize the information provided herein or to notify any third party should the information be updated, modified, revised or re-categorized. While commercially reasonable efforts have been made to provide accurate and

<sup>1</sup> The Debtors in these Chapter 11 Cases, along with the last four digits of each Debtor’s federal tax identification number are: Tritek International Inc. (7919); HyLife Foods Windom, LLC (5391); and Canwin Farms, LLC (3973). Debtors’ mailing address is 2850 Highway 60 East, Windom, MN 56101.

complete information herein, inadvertent errors or omissions may exist. In no event shall Debtors or their past or present officers, employees, attorneys, professionals and/or agents be liable to any third party for any direct, indirect, incidental, consequential or special damages (including, but not limited to, damages arising from the disallowance of any potential claim against Debtors or damages to business reputation, lost business or lost profits), whether foreseeable or not and however caused arising from or related to any information provided herein or omitted herein.

Debtors reserve their rights to amend the Schedules and Statements as may be necessary or appropriate in Debtors' sole and absolute discretion, including, but not limited to, the right to assert offsets or defenses to (which rights are expressly preserved), or to dispute, any claim reflected on the Schedules as to amount, liability or classification, or to otherwise subsequently designate any claim as "disputed," "contingent" or "unliquidated." These Global Notes will apply to all such amendments. Furthermore, nothing contained in the Schedules or Statements shall constitute a waiver of Debtors' rights with respect to the chapter 11 cases and specifically with respect to any issues involving substantive consolidation, equitable subordination and/or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code and other relevant non-bankruptcy laws to recover assets or avoid transfers, or an admission relating to the same. Any specific reservation of rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph.

Disclosure of information in one or more Schedules, one or more Statements, or one or more exhibits or attachments to the Schedules or Statements, even if incorrectly placed, shall be deemed to be disclosed in the correct Schedules, Statements, exhibits, or attachments.

Any failure to designate a claim listed on Debtors' Schedules as "disputed," "contingent" or "unliquidated" does not constitute an admission by Debtors that such amount is not "disputed," "contingent" or "unliquidated." Additionally, the dollar amounts of claims listed may be exclusive of contingent and additional unliquidated amounts. Further, the claims of individual creditors are listed as the amounts entered on Debtors' books and records and may not reflect credits or allowances due from such creditors to Debtors or setoffs applied by such creditors against amounts due by such creditors to Debtors with respect to other transactions between them. Debtors reserve all of their rights with respect to any such credits and allowances. Furthermore, listing a claim does not constitute an admission of liability by Debtor against which the claim is listed or against any of Debtors.

Some of Debtors' scheduled assets and liabilities are unknown and/or unliquidated. In such cases, no amounts are listed or the amounts are listed as "undetermined," "unknown," or to similar effect. Accordingly, for this and other reasons the Schedules may not fully reflect the aggregate amount of Debtors' assets and liabilities. All totals that are included in the Schedules and Statements represent totals of all known amounts. To the extent there are unknown or undetermined amounts, the actual totals may be different than the listed totals.

The liability information provided herein represents the estimated liability data of Debtors as of April 27, 2023 (the "Petition Date"), except as otherwise noted. Amounts presented herein are based on Debtors' reasonable efforts to determine amounts owed to creditors as of the Petition Date. Amounts owed to vendors for certain goods in transit which have not yet been received at

Debtors' facilities or services provided for which invoices have not been received as of the Petition Date, may be understated due to lack of sufficient information. Accordingly, Debtors reserve all of their rights to amend, supplement, or otherwise modify the Schedules and Statements as is necessary or appropriate.

At times, the preparation of the Schedules and the Statements required Debtors to make assumptions that may affect the reported amounts of assets and liabilities, the disclosures of contingent assets and liabilities, and/or other items. Actual results could differ from those estimates. Pursuant to Fed. R. Bankr. P. 1009, Debtors may amend their Schedules and Statements, as they deem necessary and appropriate to reflect material changes. In addition, Debtors, for the benefit of their estates, reserve the right to dispute or to assert offsets or defenses to any claim listed on the Schedules or Statements.

Given the differences between the information requested in the Schedules and the financial information utilized under generally accepted accounting principles in the United States ("GAAP"), the aggregate asset values and claim amounts set forth in the Schedules may not necessarily reflect the amounts that would be set forth in a balance sheet prepared in accordance with GAAP.

For the avoidance of doubt, listing a claim on Schedule D as "secured," on Schedule E/F as "priority" or "unsecured priority," or listing a contract or lease on Schedule G as "executory" or "unexpired," does not constitute an admission by Debtors of the legal rights of the claimant and/or contractual counterparty, or a waiver of a Debtor's right to recharacterize or reclassify such claim or contract. Failure to designate a claim on a given Debtor's Schedules as "disputed," "contingent," or "unliquidated" does not constitute an admission by Debtors that such amount is not "disputed," "contingent," or "unliquidated" or that such claim is not subject to objection. Debtors reserve their respective rights to dispute, or assert offsets, setoffs, or defenses to any claim reflected on the Schedules as to the nature, amount, liability, or status or to otherwise subsequently designate any claim as disputed, contingent and/or unliquidated.

Debtors' assets are presented at values consistent with their books and records. These values do not purport to represent the ultimate value that would be received in the event of a sale, and may not represent economic value as determined by an appraisal or other valuation technique. As it would be prohibitively expensive and an inefficient use of estate assets for Debtors to obtain current economic valuations for all of their assets, unless otherwise noted, the carrying value on Debtors' books (*e.g.*, net book value), rather than current economic values, is reflected on the Schedules and Statements. Net book values of assets generally do not reflect the current performance of the assets or the impact of the current price environment and may differ materially from the actual value and/or performance of the underlying assets.

Unless otherwise stated, the asset information provided in the Schedules and Statements reflect net book values as of March 31, 2023, the date that the most recent trial balance is available. Where most recent data is available, Debtors have endeavored to reflect this information in the Schedules and Statements.

The inventories, property, and equipment balances in the Schedules and Statements are presented without consideration of any asserted mechanics', materialmen, or similar liens that may attach (or have attached) to such inventories, property, and equipment.

Debtors' books and records have been historically maintained on a consolidated basis rather than on a legal entity basis. As such, the Schedules and Statements have been prepared on a reasonable best efforts basis to reflect the assets and liabilities for each legal entity on a non-consolidated basis.

Unless otherwise indicated, all amounts are reflected in U.S. dollars.

The Debtors incur certain offsets and other similar rights during the ordinary course of business. Offsets in the ordinary course can result from various items, including, without limitation, intercompany transactions, pricing discrepancies, returns, refunds, warranties, debit memos, credits, and other disputes between the Debtors and their suppliers and/or customers. These offsets and other similar rights are consistent with the ordinary course of business in the Debtors' industry and are not tracked separately. Therefore, although such offsets and other similar rights may have been accounted for when certain amounts were included in the Schedules, offsets are not independently accounted for, and as such, are or may be excluded from the Debtors' Schedules and Statements.

Pursuant to the *Order (I) Authorizing Debtors To Redact Certain Personally Identifiable Information For Individual Creditors; And (II) Granting Related Relief* [Docket No. 55], the Debtors have redacted residential addresses of individual persons on the Schedules and Statements.

Certain of Debtors' assets, liabilities, and prepetition payments may properly be disclosed in response to multiple parts of the Schedules and Statements. To the extent these disclosures would be duplicative, Debtors may have determined to only list such assets, liabilities, and prepetition payments once.

In the ordinary course of their businesses, Debtors lease facilities from certain third-party lessors for use in their daily operations. Any such leases are set forth in Schedule G. The property subject to any of such leases is not reflected in Schedule A/B as either owned property or assets of Debtors. Neither is the property subject to any such leases reflected in the Statements as property or assets of third parties within the control of a Debtor. Nothing in the Schedules is or shall be construed as an admission or determination as to the legal status of any lease (including whether any lease is a true lease or a financing arrangement), and Debtors reserve all rights with respect to any such issues.

For certain reporting and internal accounting purposes, the Debtors record certain intercompany receivables and payables. Receivables and payables among the Debtors are reported as assets on Schedule A/B or liabilities on Schedule E/F part 2, as appropriate (collectively, the "Intercompany Claims"). While the Debtors have used commercially reasonable efforts to ensure that the proper intercompany balance is attributed to each legal entity, the Debtors and their estates reserve all rights to amend the Intercompany Claims in the Schedules and Statements, including, without limitation, to change the characterization, classification, categorization or designation of

such claims, including, but not limited to, the right to assert that any or all Intercompany Claims are, in fact, consolidated or otherwise properly assets or liabilities of a different Debtor entity. Although separate Schedules and Statements have been prepared and filed for each of the Debtors, certain of the information set forth in the Schedules and Statements has been prepared on a consolidated basis. As a result, the Schedules and Statements may not reflect all intercompany activity.

Debtors have excluded certain categories of assets, tax accruals, and liabilities from the Schedules and Statements, including, without limitation, goodwill, accrued salaries, employee benefit accruals, and deferred gains. Debtors have also excluded rejection damage claims of counterparties to executory contracts and unexpired leases that may or may not be rejected, to the extent such damage claims exist. In addition, certain immaterial assets and liabilities may have been excluded.

Debtors have not included in the Schedules and Statements the future obligations of any capital or operating leases. To the extent that there was an amount outstanding as of the Petition Date, the creditor has been included on Schedule F of the Schedules.

The liabilities listed on the Schedules do not reflect any analysis of claims under section 503(b)(9) of the Bankruptcy Code. Accordingly, the Debtors reserve all of their rights to dispute or challenge the validity of any asserted claims under section 503(b)(9) of the Bankruptcy Code or the characterization of the structure of any such transaction or any document or instrument related to any creditor's claim.

The Bankruptcy Court has authorized the Debtors to pay, in their discretion, certain outstanding prepetition claims on a postpetition basis. Prepetition liabilities which have been paid postpetition have been excluded from the Schedules and Statements. To the extent the Debtors pay any of the claims listed in the Schedules and Statements pursuant to any orders entered by the Bankruptcy Court, the Debtors reserve all rights to amend and supplement the Schedules and Statements and take other action, such as filing objections to claims, as is necessary and appropriate to avoid overpayment or duplicate payment for such liabilities.

For purposes of the Schedules and Statements, Debtors defined "insiders" pursuant to section 101(31) of the Bankruptcy Code as: (a) directors; (b) officers; (c) persons in control of Debtors; (d) relatives of Debtors' directors, officers, or persons in control of Debtors; and (e) debtor/non-debtor affiliates of the foregoing. Persons listed as "insiders" have been included for informational purposes only and by including them in the Schedules, shall not constitute an admission that those persons are insiders for purposes of section 101(31) of the Bankruptcy Code. Moreover, Debtors do not take any position with respect to: (a) any insider's influence over the control of Debtors; (b) the management responsibilities or functions of any such insider; (c) the decision making or corporate authority of any such insider; or (d) whether Debtors or any such insider could successfully argue that he or she is not an "insider" under applicable law or with respect to any theories of liability or for any other purpose.

The Schedules and Statements have been signed by Howard Siemens, in his capacity as (i) Vice-President and Secretary of HyLife Foods Windom, LLC, (ii) Vice-President and Secretary

of Canwin Farms, LLC, and (iii) Secretary of Tritex International Inc. Mr. Siemens was appointed to his position with HyLife Foods Windom, LLC in May 2020, his position with Canwin Farms, LLC in June 2020, and his position with Tritex International Inc. in December 2019. Therefore, Mr. Siemens did not oversee the transactions and records prior to his appointment. In reviewing and signing the Schedules and Statements, Mr. Siemens has necessarily relied upon the efforts, statements and representations of various of Debtors' personnel and professionals. Mr. Siemens has not (and could not have) personally verified the accuracy of each such statement and representation, including statements and representations concerning amounts owed to creditors and their addresses.

### **Specific Disclosures Regarding the Schedules**

**Schedule A/B 1-2.** Debtor does not retain petty cash. All cash of Debtors resides in bank accounts listed in Schedule A/B 3.

**Schedule A/B 3.** The bank account balances listed are as of April 26, 2023 for HyLife Foods Windom, LLC, Canwin Farms, LLC and Tritex International Inc.

**Schedule A/B 6-9.** In the books and records of Debtors, prepaid amounts are broken out into several categories but the underlying detail is not available. Accordingly, Debtors have presented these prepayments without this counterparty detail.

**Schedule A/B 11.** Accounts receivable are presented based on net book value as of April 26, 2023. Such accounts receivable have not been adjusted to reflect any counterclaims or setoffs that customers may assert.

**Schedule A/B 18-26.** The inventory reflects inventory listing information. Amounts presented represent balances as reflected in Debtors' books and records as of April 26, 2023. Debtors have used reasonable best efforts to identify all inventory counts but the dates were not available.

**Schedule A/B 29.** The Farm animals at CanWin are counted only at the end of the month. Therefore, we included the net book value of CanWin's farm animals per the trial balance as of March 31, 2023.

**Schedule A/B 38 - 45.** Office furniture, fixtures, and equipment reflect fixed asset listing information as of March 31, 2023, the date that the most recent trial balance is available.

**Schedule A/B 50.** Machinery, fixtures, and equipment reflect fixed asset listing balance information. Amounts presented represent balances as reflected in Debtors' books and records as of March 31, 2023, the date most recently available. While the Machinery, fixtures, and equipment were appraised at the end of calendar year 2022, it is difficult to tie the specific assets back to the balance sheet. Therefore, net book values were used in lieu of appraised values.

**Schedule A/B 59 - 69.** Debtors have used reasonable efforts to identify any trademarks, patents, business licenses, and intellectual property that are assets of Debtors. Exclusion of certain business licenses and intellectual property shall not be construed as an admission that such business licenses, customer lists, and mailing lists, and intellectual property rights have been abandoned, terminated, assigned, expired by their terms, or have been assigned or otherwise transferred pursuant to a sale, acquisition, or other transaction. Conversely, inclusion of certain intellectual property shall not be construed to be an admission that such intellectual property rights have not been abandoned, have not been terminated, or otherwise have not expired by their terms, or have not been assigned or otherwise transferred pursuant to a sale, acquisition, or other transaction. Debtors have made every effort to attribute intellectual property to the rightful Debtor owner, however, in some instances, intellectual property owned by one Debtor may, in fact, be owned by another. Accordingly, Debtors reserve all rights with respect to the legal status of any and all intellectual property rights.

**Schedule A/B - 72.** HyLife Foods Windom, LLC and Canwin Farms, LLC are limited liability corporations. Therefore, the income and losses of these entities flow untaxed to its owner, Skyline International Inc. Skyline International Inc. is the corporate parent of these two entities and therefore reports the income and losses of those entities in its tax filings. Furthermore, Tritex International Inc does not file its own taxes. Non-debtor Skyline International Inc. files taxes on a consolidated basis with its corporate subsidiaries, including Tritex International Inc. Non-debtor Skyline International Inc. currently has a net operating loss primarily because of the losses HyLife Foods Windom, LLC has experienced. However, this is an asset of Skyline International Inc. and not reported on the Schedules.

**Schedule D.** The descriptions provided on Schedule D are intended only as a summary. Reference to the applicable loan agreements and related documents is necessary for a complete description of the collateral and the nature, extent and priority of any liens. Nothing in these Notes or in the Schedules and Statements shall be deemed a modification or interpretation of the terms of such agreements or related documents. Creditors' claims provided on Schedule D arose, or were incurred, on various dates. In certain instances, the date on which such claim arose is an open issue of fact.

**Schedule E/F.** Debtors have made reasonable efforts to report all priority and non-priority unsecured claims against Debtors on Schedule E/F based on Debtors' books and records as of the Petition Date. Debtors have listed all known taxing authorities for each Debtor. These tax claims are, or may in the future be, subject to audits, and Debtors are unable to determine with certainty the amount of the tax claims listed on Schedule E/F. In addition, there may be other contingent, unliquidated claims from state and local taxing authorities, not all of which are listed.

The claims of individual creditors for, among other things, goods, products, services, or taxes are listed as the amounts entered on Debtors' books and records and may not reflect credits, allowances, or other adjustments due from such creditors to Debtors. Amounts presented herein are based on Debtors' best efforts to determine amounts owed to creditors as of the Petition Date. Amounts owed to vendors for certain goods in transit which have not yet been received at

Debtors' facilities, or for services provided where invoices have not been received, may be understated due to lack of sufficient information.

Schedule E/F also contains information regarding pending litigation involving Debtors. However, certain omissions may have occurred. Certain pending litigation reflected as claims against a particular Debtor may relate to one or more of the other Debtors. The Debtors made reasonable efforts to accurately record any pending litigation in the Schedules and Statements of the Debtor that is the party to the litigation. The inclusion of any legal action in the Schedules and Statements does not constitute an admission by Debtors of any liability, the validity of any litigation, or the amount of any potential claim that may result from any claims with respect to any legal action and the amount and treatment of any potential claim resulting from any legal action currently pending or that may arise in the future.

Schedule E/F does not include certain deferred liabilities, accruals or general reserves. Such amounts are general estimates and do not represent specific claims as of the Petition Dates for each respective Debtor.

**Schedule G.** Although commercially reasonable efforts have been made to ensure the accuracy of Schedule G regarding executory contracts and unexpired leases, inadvertent errors, omissions or over-inclusion may have occurred in preparing Schedule G. Despite reasonable best efforts, in some instances, Debtors may not have been able to identify which Debtor entity is party to a particular contract. In addition, certain of the contracts, agreements and leases listed on Schedule G may have been entered into by more than one Debtor. Accordingly, Debtors have made their reasonable best efforts to determine the correct Debtor's Schedule G on which to list such executory contract.

Contracts reflected on Schedule G do not reflect the impact of any counterparty's assertion of termination due to breach of contract or cessation of operations. Debtors hereby expressly reserve the right to assert that any instrument listed on Schedule G is or is not an executory contract within the meaning of section 365 of the Bankruptcy Code. Debtors reserve all of their rights, claims, and causes of action with respect to claims associated with any contract or agreement listed on Schedule G, including their right to dispute or challenge the characterization or the structure of any transaction, document, or instrument (including any intercompany agreement, if any) related to a creditor's claim.

Certain of the contracts and agreements listed on Schedule G may consist of several parts, including purchase orders, amendments, restatements, waivers, letters, and other documents that may not be listed on Schedule G or that may be listed as a single entry.

Certain of the contracts, agreements, and leases listed on Schedule G may have expired or may have been rejected, terminated, modified, amended, and/or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letters, memoranda, and other documents, instruments, and agreements that may not be listed therein despite Debtors' use of reasonable efforts to identify such documents. Further, unless otherwise specified on Schedule G, each executory contract or unexpired lease listed thereon shall include all exhibits, schedules, riders, modifications, declarations, amendments, supplements, attachments, restatements, or other agreements made directly or indirectly by any agreement, instrument, or other document

that in any manner affects such executory contract or unexpired lease, without respect to whether such agreement, instrument, or other document is listed thereon. In some cases, the same supplier or provider appears multiple times on Schedule G. This multiple listing is intended to reflect distinct agreements between the applicable Debtor and such supplier or provider.

**Schedule H.** Debtors may not have identified certain guarantees associated with Debtors' executory contracts, unexpired leases, and other such agreements. Debtors reserve all of their rights to amend the Schedules to the extent that additional guarantees are identified or any scheduled guarantees are discovered to have expired or be unenforceable. In the ordinary course of their businesses, Debtors may be involved in pending or threatened litigation. These matters may involve multiple plaintiffs and defendants, some or all of whom may assert cross-claims and counter-claims against other parties. Because all such claims are contingent, disputed and/or unliquidated, such claims have not been set forth individually on Schedule H. Litigation matters can be found on each Debtor's Schedule F and Statement 7, as applicable.

### **Specific Disclosures with Respect to the Debtors' Statements**

**Statement 3.** During the 90 day period prior to the Petition Date, disbursements made on account of multiple invoices may be reflected as a single payment. Furthermore, all payroll and insider related disbursements have been omitted from this list. In addition, all payments to insiders and bankruptcy professionals have been omitted from this list as such payments appear in response to Statement question 4 and Statement question 11, respectively.

**Statement 4.** For the purpose of this question, all payments are listed on the Statement of the Debtor that actually made the payment. Statement 4 accounts for a respective Debtor's intercompany transactions, as well as other transfers to insiders as applicable. With respect to individuals, the amounts listed reflect the universe of payments and transfers to such individuals excluding compensation. Amounts paid on behalf of such employee for certain life and disability coverage, which coverage is provided to all of the Debtors' employees, has not been included.

All insider payments are included on Statement 4 and specifically excluded from Statement 3. The listing of a party as an Insider in the Schedules and Statements is not intended to be, nor shall be, construed as a legal characterization or determination of such party as an actual insider and does not act as an admission of any fact, claim, right or defense, and all such rights, claims, and defenses are hereby expressly reserved.

**Statement 7.** Debtors have used reasonable best efforts to identify all legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which Debtors were involved in any capacity within one year before the Petition Date. However, certain omissions may have occurred. The inclusion of any legal action in this question does not constitute an admission by Debtors of any liability, the validity of any litigation, or the amount of any potential claim that may result from any claims with respect to any legal action and the amount

and treatment of any potential claim resulting from any legal action currently pending or that may arise in the future.

**Statement 10.** The Debtors occasionally incur losses for a variety of reasons, including theft and property damage. The Debtors, however, may not have records of all such losses if such losses do not have a material impact on the Debtors' businesses or are not reported for insurance purposes.

**Statement 11.** Out of an abundance of caution, the Debtors have included payments to all professionals who have rendered any advice related to the Debtors' bankruptcy proceedings in Statement 11. However, it is possible that the disclosed fees also relate to other, non-bankruptcy related services, and may include services rendered to other parties.

**Statement 22-24.** The Debtors are not aware of any environmental litigation, notice from a governmental unit of potential environmental liability or violation of environmental law or sites where notice was provided to a governmental unit regarding any release of hazardous material.

**Statement 26d.** Over the prior two years, Debtors have provided their financial statements to various parties, including potential lenders, investors, vendors, government entities and other interested parties. No efforts were made to keep records of parties provided with this information.

**Statement 29.** Debtors have used reasonable best efforts to obtain the tenure of all former officers and directors. However, certain information was not available.

**Statement 30.** Unless otherwise indicated in a Debtor's specific response to Statement 30, the Debtors have included a comprehensive response to Statement 30 in Statement 4.

**Fill in this information to identify the case:****Debtor name:** HyLife Foods Windom, LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 23-10521☐ Check if this is an amended filing

Official Form 206Sum

**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**

Copy line 88 from Schedule A/B .....

\$38,992,303.05

**1b. Total personal property:**

Copy line 91A from Schedule A/B .....

\$85,179,189.41

**1c. Total of all property:**

Copy line 92 from Schedule A/B .....

\$124,171,492.46

**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D .....

\$113,402,927.58

**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of Schedule E/F .....

UNDETERMINED

**3b. Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F .....

+ \$15,173,784.89

**4. Total liabilities**

Lines 2 + 3a + 3b .....

\$128,576,712.47

**Fill in this information to identify the case:****Debtor name:** HyLife Foods Windom, LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 23-10521☐ Check if this is an amended filing

Official Form 206A/B

**Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes. Fill in the information below**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**

2.1. \_\_\_\_\_ \$ \_\_\_\_\_

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1.	ROYAL BANK OF CANADA 20 KING STREET WEST, 4TH FLOOR TORONTO ON M5H1C4 CANADA	CHECKING ACCOUNT	2102	\$1.20
3.2.	ROYAL BANK OF CANADA RBC PLAZA 301 FAYETTEVILLE STREET STE 1100 RALEIGH NC 27601	CHECKING ACCOUNT	1541	\$492,188.20
3.3.	COMPEER 2600 JENNY WREN TRAIL PO BOX 810 SUN PRAIRIE WI 53590	CHECKING ACCOUNT	8600	\$16,779,615.89
3.4.	WILMINGTON SAVINGS FUND SOCIETY	CHECKING ACCOUNT	3091	\$0.00

**4. Other cash equivalents (Identify all)**

	Description	Name of institution	Type of account	Last 4 digits of account number	Current value of debtor's interest
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4.1. \_\_\_\_\_ \$ \_\_\_\_\_

**5. Total of part 1**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$17,271,805.29**

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below

**7. Deposits, including security deposits and utility deposits**

	Description, including name of holder of deposit	Current value of debtor's interest
7.1.	SECURITY DEPOSIT  CITY OF NORTH MANKATO NORWOOD INN - MANKATO 1001 BELGRADE AVE NORTH MANKATO MN 56003	\$200,000.00
7.2.	ESCROW DEPOSIT  CITY OF NORTH MANKATO NORWOOD INN - MANKATO 1001 BELGRADE AVE NORTH MANKATO MN 56003	\$520,000.00
7.3.	UTILITY DEPOSIT  CITY OF WINDOM 444 9TH ST WINDOM MN 56101	\$300.00
7.4.	UTILITY DEPOSIT  CITY OF WINDOM 444 9TH ST WINDOM MN 56101	\$300.00
7.5.	UTILITY DEPOSIT  CITY OF WINDOM 444 9TH ST WINDOM MN 56101	\$300.00
7.6.	UTILITY DEPOSIT  CITY OF WINDOM 444 9TH ST WINDOM MN 56101	\$300.00
7.7.	SECURITY DEPOSIT  DAINTRIV PEDERSEN PO BOX 2 MOUNTAIN LAKE MN 56159	\$800.00
7.8.	SECURITY DEPOSIT  GRANITE CITY REAL ESTATE, LLC LAKESIDE APTS - UNIT #203 3900 ROOSEVELT RD #125 ST. CLOUD MN 56301	\$500.00
7.9.	SECURITY DEPOSIT  GRANITE CITY REAL ESTATE, LLC LAKESIDE APTS - UNIT #207 3900 ROOSEVELT RD #125 ST. CLOUD MN 56301	\$500.00

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****7. Deposits, including security deposits and utility deposits**

	Description, including name of holder of deposit	Current value of debtor's interest
7.10.	SECURITY DEPOSIT  GRANITE CITY REAL ESTATE, LLC LAKESIDE APTS - UNIT #306 3900 ROOSEVELT RD #125 ST. CLOUD MN 56301	\$500.00
7.11.	SECURITY DEPOSIT  GRANITE CITY REAL ESTATE, LLC LAKESIDE APTS - UNIT #312 3900 ROOSEVELT RD #125 ST. CLOUD MN 56301	\$500.00
7.12.	SECURITY DEPOSIT  GREG GRUBER 803 S LAFAYETTE AVENUE FULDA MN 56131	\$1,200.00
7.13.	SECURITY DEPOSIT  MINNESOTA INVESTMENT PROPERTIES, LLC PO BOX 394 HERON LAKE MN 56137	\$800.00
7.14.	UTILITY DEPOSIT  MOUNTAIN LAKE UTILITIES 930 THIRD AVENUE, DRAWER C MOUNTAIN LAKE MN 56159	\$250.00
7.15.	UTILITY DEPOSIT  MOUNTAIN LAKE UTILITIES 930 THIRD AVENUE, DRAWER C MOUNTAIN LAKE MN 56159	\$250.00
7.16.	UTILITY DEPOSIT  MOUNTAIN LAKE UTILITIES 930 THIRD AVENUE, DRAWER C MOUNTAIN LAKE MN 56159	\$250.00
7.17.	SECURITY DEPOSIT  RGS-CW OF PUERTO RICO, INC. 7 CALLE 1 SUITE 204 GUAYNABO PR 00968-1718 US TERRITORY	\$2,800.00
7.18.	ESCROW DEPOSIT (WORK COMP)  STARR INDEMNITY & LIABILITY COMPANY 399 PARK AVENUE NEW YORK NY 10022	\$30,000.00
7.19.	SECURITY DEPOSIT  STEARNS MARTIN	\$6,000.00
7.20.	SECURITY DEPOSIT  T&M DEVELOPMENT GUARDIAN INN - WINDOM 111 W LIND COURT MANKATO MN 56001	\$24,180.00

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit	Current value of debtor's interest
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7.21. SECURITY DEPOSIT  VAN TOL PROPERTIES, LLC M2 LOFT - UNIT #406 1050 MARSH STREET MANKATO MN 56001	\$1,000.00
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**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment	Current value of debtor's interest
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8.1. PREPAID INSURANCE  BFL CANADA	\$274,583.53
8.2. PROFESSIONAL FEES  DONLIN RECANO & CO INC	\$21,641.90
8.3. CONSTRUCTION ADVANCE  HEADWATERS DEVELOPMENT, LLC	\$1,750,000.00
8.4. PREPAID INSURANCE  KANSAS CITY OF LOCKTON	\$29,229.75
8.5. PROFESSIONAL FEES  KATTEN MUCHIN ROSENMAN LLP	\$63,822.58
8.6. PREPAID INSURANCE  NATIONWIDE AGRIBUSINESS	\$5,163.00
8.7. PREPAID INSURANCE  NATIONWIDE AGRIBUSINESS	\$88,942.32
8.8. PREPAID INSURANCE  NATIONWIDE AGRIBUSINESS	\$1,530.37
8.9. PROFESSIONAL FEES  POTTER ANDERSON & CORROON LLP	\$105,257.50
8.10. PROFESSIONAL FEES  PRICEWATERHOUSECOOPERS LLP	\$99,980.00
8.11. PREPAID INSURANCE  STARR INDEMNITY & LIABILITY COMPANY	\$878.78
8.12. DUPLICATE TAX PYMT (PAYROLL TAXES)  UKG (3RD PARTY PAYROLL SERVICE)	\$66,973.27

**9. Total of part 2**

Add lines 7 through 8. Copy the total to line 81.

\$3,298,733.00

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes. Fill in the information below.

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****Current value of  
debtor's interest****11. Accounts receivable**

	Face amount	Doubtful or uncollectible accounts		
11a. 90 days old or less:	\$10,901,041.32	- \$0.00	= ..... →	\$10,901,041.32
11b. Over 90 days old:	\$786,062.83	- \$0.00	= ..... →	\$786,062.83

**12. Total of part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$11,687,104.15****Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes. Fill in the information below.

**Valuation method used  
for current value****Current value of  
debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock

14.1. \_\_\_\_\_ \$ \_\_\_\_\_

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity % of ownership

15.1. \_\_\_\_\_ % \_\_\_\_\_ \$ \_\_\_\_\_

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe

16.1. \_\_\_\_\_ \$ \_\_\_\_\_

**17. Total of part 4**

Add lines 14 through 16. Copy the total to line 83.

**\$0.00****Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.  
☒ Yes. Fill in the information below.

**General description****Date of the last  
physical inventory****Net book value of  
debtor's interest  
(Where available)****Valuation method used  
for current value****Current value of  
debtor's interest****19. Raw materials**

19.1. \_\_\_\_\_ \$ \_\_\_\_\_

**20. Work in progress**

20.1. \_\_\_\_\_ \$ \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****21. Finished goods, including goods held for resale**

	General description	Date of the last physical inventory	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
21.1.	CARCASS INVENTORY	4/26/2023	\$1,147,758.30	NET BOOK VALUE	\$1,147,758.30
21.2.	MEAT INVENTORY	4/26/2023	\$5,751,536.21	NET BOOK VALUE	\$5,751,536.21

**22. Other inventory or supplies**

	General description	Date of the last physical inventory	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
22.1.	PACKAGING INVENTORY	3/31/2023	\$1,080,027.04	NET BOOK VALUE	\$1,080,027.04
22.2.	CHARGEBACK INVENTORY	3/31/2023	\$1,380.64	NET BOOK VALUE	\$1,380.64
22.3.	MAINTENANCE INVENTORY	3/31/2023	\$5,804,336.79	NET BOOK VALUE	\$5,804,336.79

**23. Total of part 5**

Add lines 19 through 22. Copy the total to line 84.

**\$13,785,038.98****24. Is any of the property listed in Part 5 perishable?**

- ☐ No  
☒ Yes

**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☐ No  
☒ Yes Book value: \$6,899,294.51 Valuation method: NET BOOK VALUE Current value: \$6,899,294.51

**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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**28. Crops—either planted or harvested**

28.1. \_\_\_\_\_ \$ \_\_\_\_\_

**29. Farm animals.** Examples: Livestock, poultry, farm-raised fish

29.1. \_\_\_\_\_ \$ \_\_\_\_\_

**30. Farm machinery and equipment** (Other than titled motor vehicles)

30.1. \_\_\_\_\_ \$ \_\_\_\_\_

**31. Farm and fishing supplies, chemicals, and feed**

31.1. \_\_\_\_\_ \$ \_\_\_\_\_

**32. Other farming and fishing-related property not already listed in Part 6**

32.1. \_\_\_\_\_ \$ \_\_\_\_\_

**33. Total of part 6**

Add lines 28 through 32. Copy the total to line 85.

**\$0.00**

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****34. Is the debtor a member of an agricultural cooperative?**

- ☐ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

- ☐ No
- ☐ Yes Book value: \$\_\_\_\_\_ Valuation method: \_\_\_\_\_ Current value: \$\_\_\_\_\_

**36. Is a depreciation schedule available for any of the property listed in Part 6?**

- ☐ No
- ☐ Yes

**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?**

- ☐ No
- ☐ Yes

**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
- ☒ Yes. Fill in the information below.

General description		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>39. Office furniture</b>				
39.1.	_____	\$ _____	_____	\$ _____
<b>40. Office fixtures</b>				
40.1.	_____	\$ _____	_____	\$ _____
<b>41. Office equipment, including all computer equipment and communication systems equipment and software</b>				
		Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
41.1.	CUBICLES	\$44,344.32	Net Book Value	\$44,344.32
41.2.	CAFETERIA TABLES	\$19,576.32	Net Book Value	\$19,576.32
41.3.	COMPUTER EQUIPMENT - VARIOUS	\$27,648.85	Net Book Value	\$27,648.85
<b>42. Collectibles.</b> Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles				
42.1.	_____	\$ _____	_____	\$ _____
<b>43. Total of part 7</b>				
Add lines 39 through 42. Copy the total to line 86.				\$91,569.49

**44. Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
- ☐ Yes

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****45. Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**☐ No. Go to Part 9.☒ Yes. Fill in the information below.

	<b>General description</b> Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	<b>Net book value of debtor's interest (Where available)</b> (Where available)	<b>Valuation method used for current value</b>	<b>Current value of debtor's interest</b>
<b>47.</b>	<b>Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1.	LIGHT FLEET UNIT 4045 FORD TRUCK - VIN 1FTEX1EB1JKE66575	\$23,000.00	Net Book Value	\$23,000.00
47.2.	UNIT 4052 SANITATION - EXTRAS - VIN 1FTFW1EV6AFA24966	\$8,380.71	Net Book Value	\$8,380.71
47.3.	DRY VAN TRAILERS UNIT 4524 - VIN 1UYVS25341U385, UNIT 4525 - VIN 1GRAA06201S060849, UNIT 4526 - VIN 1JJV532W1YF715265, UNIT WDC1 - VIN 1DW1A5328BS264628	\$30,835.61	Net Book Value	\$30,835.61
47.4.	TANKER TRAILER UNIT W4522 - VIN 1W9S82027L1028961	\$19,652.09	Net Book Value	\$19,652.09
47.5.	LIGHT FLEET UNIT 404 - UNIT 4044 - VIN 1V2LP2CA6MC601344	\$28,429.72	Net Book Value	\$28,429.72
47.6.	SHUNT TRUCK 2 #61 - UNIT W6111 - VIN 4LMBF2115LL028744	\$84,092.57	Net Book Value	\$84,092.57
47.7.	SHUNT TRUCK #61 - UNIT W6112 - VIN 4LMBF2117LL028745	\$84,092.57	Net Book Value	\$84,092.57
47.8.	FUEL TRUCK UNIT 4039 - VIN 1FD0X4GYXCEA61968	\$16,015.63	Net Book Value	\$16,015.63
47.9.	LIGHTFLEET UNIT #4035 - VIN 3VV2B7AX5MM020076	\$18,904.41	Net Book Value	\$18,904.41
47.10.	UNIT 4043 2004 JEEP LIBERTY - VIN 1J4GL48K94W178800	\$711.64	Net Book Value	\$711.64
47.11.	UNIT 4523 FLAT GARBAGE SEMI TRAILER - VIN SNF5NFS4825BH000984	\$10,000.00	Net Book Value	\$10,000.00
47.12.	SHUNT TRUCK W6090 - VIN316437 OFF ROAD	\$35,000.00	Net Book Value	\$35,000.00
<b>48.</b>	<b>Watercraft, trailers, motors, and related accessories.</b> Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1.	_____	\$ _____	_____	\$ _____
<b>49.</b>	<b>Aircraft and accessories</b>			
49.1.	_____	\$ _____	_____	\$ _____
<b>50.</b>	<b>Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b>			
50.1.	REFRIGERATION EQUIPMENT 2023 JC519	\$724,059.65	Net Book Value	\$724,059.65
50.2.	CI EQUIPMENT MODIFICATIONS JC499	\$235,493.18	Net Book Value	\$235,493.18
50.3.	COMPACTOR RELOCATION JC488	\$10,419.88	Net Book Value	\$10,419.88
50.4.	RAIL & DRIVE EQUIPMENT JC486	\$83,237.69	Net Book Value	\$83,237.69
50.5.	DUAL ENERGY XRAY LOIN JC470	\$79,542.51	Net Book Value	\$79,542.51
50.6.	WAREHOUSE ELECTRICAL IMPROVEMENT	\$21,621.16	Net Book Value	\$21,621.16
50.7.	EAST MANUAL SPLIT SAW STATION	\$52,533.45	Net Book Value	\$52,533.45

Debtor	HyLife Foods Windom, LLC	Case number (if known) 23-10521		
50.8.	PRODUCT DATE STAMPER	\$6,646.00	Net Book Value	\$6,646.00
50.9.	SINGER HEAD BURNER	\$41,234.16	Net Book Value	\$41,234.16
50.10.	VISCERA PAN WASH PUMP	\$65,574.38	Net Book Value	\$65,574.38
50.11.	REPLACE MANUAL RAIL SWITCHES	\$13,636.39	Net Book Value	\$13,636.39
50.12.	WAREHOUSE ELECTRICAL IMPROVEMENT	UNDETERMINED	Net Book Value	UNDETERMINED
50.13.	GAMS	\$33,530.62	Net Book Value	\$33,530.62
50.14.	HEAD DEBONING LINE COMMISSION JC354/443	\$40,657.61	Net Book Value	\$40,657.61
50.15.	TROLLEY BLOW OFF JC355	\$26,747.68	Net Book Value	\$26,747.68
50.16.	BATTERIES JC356	\$40,110.37	Net Book Value	\$40,110.37
50.17.	KILL FLOOR CHAINS 2	\$27,310.58	Net Book Value	\$27,310.58
50.18.	KILL FLOOR CHAINS	\$262,763.88	Net Book Value	\$262,763.88
50.19.	JOWL AND HAM LINE	\$384,874.00	Net Book Value	\$384,874.00
50.20.	PACKAGING STATION	\$577,423.99	Net Book Value	\$577,423.99
50.21.	JOWL AND HAM LINE	\$42,459.09	Net Book Value	\$42,459.09
50.22.	BAY 7-HEAD DEBONE	\$134,301.36	Net Book Value	\$134,301.36
50.23.	BAY 6-HAM DEBONIN	\$2,668,106.60	Net Book Value	\$2,668,106.60
50.24.	MANIFEST STATION INSTALL	\$13,411.74	Net Book Value	\$13,411.74
50.25.	FALLEN HOG STATION	\$36,315.12	Net Book Value	\$36,315.12
50.26.	CARLISLE INMOTION WEIGHT	\$227,906.96	Net Book Value	\$227,906.96
50.27.	PACKAGING STATION	\$50,909.04	Net Book Value	\$50,909.04
50.28.	PARTS RACKING	\$29,508.13	Net Book Value	\$29,508.13
50.29.	LOAD OUT COOLER AIR DIST	\$26,775.52	Net Book Value	\$26,775.52
50.30.	KILL FLOOR SANITARY	\$19,125.45	Net Book Value	\$19,125.45
50.31.	SANITATION CABINETS	\$26,543.55	Net Book Value	\$26,543.55
50.32.	CRYOVAC PLATES	\$4,558.83	Net Book Value	\$4,558.83
50.33.	2 WALKIE PALLET JACKS	\$5,211.86	Net Book Value	\$5,211.86
50.34.	DUALENERGY XRAY LOIN/B	\$300,814.42	Net Book Value	\$300,814.42
50.35.	AUTO PLC STRAP MACHINE SN:17968	\$12,748.53	Net Book Value	\$12,748.53
50.36.	AUTO PLC STRAP MACHINE SN:17965	\$12,748.53	Net Book Value	\$12,748.53
50.37.	LOIN SHELL BONING LINE	\$532,022.94	Net Book Value	\$532,022.94
50.38.	REPLACE OLD COMPUTER	\$10,182.61	Net Book Value	\$10,182.61
50.39.	EMAINT ADD USERS	\$3,369.33	Net Book Value	\$3,369.33
50.40.	EMAINT USERS ADDITION	\$3,096.46	Net Book Value	\$3,096.46
50.41.	3 NEW BUNG GUNS	\$7,886.03	Net Book Value	\$7,886.03
50.42.	20 HP TOSHIBA MOTOR	\$3,922.28	Net Book Value	\$3,922.28
50.43.	15 HP TOSHIBA MOTOR	\$3,663.66	Net Book Value	\$3,663.66
50.44.	GORMAN RUPP 4" PUMP	\$2,867.98	Net Book Value	\$2,867.98
50.45.	TROLLEYS 2021ADDITION	\$40,371.29	Net Book Value	\$40,371.29
50.46.	KILL FLOOR MCC AC UNIT	\$12,957.77	Net Book Value	\$12,957.77
50.47.	IN-MOTION LINE #3	\$214,106.24	Net Book Value	\$214,106.24
50.48.	RECTUM HARVEST	\$4,397.02	Net Book Value	\$4,397.02

Debtor	HyLife Foods Windom, LLC	Case number (if known) 23-10521		
50.49.	CARCASS INTERVENTION PRO	\$363,651.76	Net Book Value	\$363,651.76
50.50.	PACKAGING AREA UPDATES	\$959,004.39	Net Book Value	\$959,004.39
50.51.	PACKAGING STATION AND CON	\$770,404.25	Net Book Value	\$770,404.25
50.52.	IWP LINE (BELLY)	\$20,359.12	Net Book Value	\$20,359.12
50.53.	TRANSFER CONVEYORS	\$156,308.76	Net Book Value	\$156,308.76
50.54.	SHOULDER UDE LINE	\$1,600,503.25	Net Book Value	\$1,600,503.25
50.55.	REFRIGERATION UPGRADES	\$1,949,858.04	Net Book Value	\$1,949,858.04
50.56.	SPRINKLER SYSTEM CONVERSION	\$163,614.03	Net Book Value	\$163,614.03
50.57.	BACK RIB LINE	\$325,524.23	Net Book Value	\$325,524.23
50.58.	CARCASS RAIL ADDITION	\$15,806.28	Net Book Value	\$15,806.28
50.59.	MAIN SINGLE RIB BELLY LINE	\$1,079,498.33	Net Book Value	\$1,079,498.33
50.60.	TOTE DUMPER #2	\$3,333.33	Net Book Value	\$3,333.33
50.61.	CONVEYORS - HYLIFE PROJ	\$79,482.27	Net Book Value	\$79,482.27
50.62.	BELLY SKINNER 2	\$13,404.51	Net Book Value	\$13,404.51
50.63.	CRYOVAC MACHINE ACCESSORIES	\$26,732.52	Net Book Value	\$26,732.52
50.64.	JARVIS EQUIPMENT	\$10,235.60	Net Book Value	\$10,235.60
50.65.	QA UV PROJECT	\$7,057.10	Net Book Value	\$7,057.10
50.66.	STRAPPING MACHINE	\$8,976.79	Net Book Value	\$8,976.79
50.67.	ANAGO KST 200E MACHINE	\$7,451.94	Net Book Value	\$7,451.94
50.68.	FOOT SAW	\$19,569.61	Net Book Value	\$19,569.61
50.69.	X-RAY SYSTEM 2	\$63,146.47	Net Book Value	\$63,146.47
50.70.	BELLY SKINNER	\$20,270.26	Net Book Value	\$20,270.26
50.71.	CROWN FORKLIFTS/JACKS	UNDETERMINED	Net Book Value	UNDETERMINED
50.72.	CRYOVAC MACHINE	\$67,352.17	Net Book Value	\$67,352.17
50.73.	VIDEO SURVEILLANCE	\$18,838.67	Net Book Value	\$18,838.67
50.74.	KNIFE SHARPENING SYSTEM	UNDETERMINED	Net Book Value	UNDETERMINED
50.75.	X-RAY SYSTEM #1	\$61,128.49	Net Book Value	\$61,128.49
50.76.	DOCK EVAPORATOR	\$16,104.01	Net Book Value	\$16,104.01
50.77.	WASTEWATER LAGOON	\$1,331.58	Net Book Value	\$1,331.58
50.78.	STRAPPING MACHINE	UNDETERMINED	Net Book Value	UNDETERMINED
50.79.	SCANNING GUN	UNDETERMINED	Net Book Value	UNDETERMINED
50.80.	WEIGHTS FOR SCALE TESTING	UNDETERMINED	Net Book Value	UNDETERMINED
50.81.	COOLERS	\$29,041.61	Net Book Value	\$29,041.61
50.82.	COMPRESSED AIR SYSTEM	\$115,817.84	Net Book Value	\$115,817.84
50.83.	ADDITIONS TO M&E FROM WIP	\$222,135.10	Net Book Value	\$222,135.10
50.84.	BETCHER EQUIPMENT KILL AND CUT	UNDETERMINED	Net Book Value	UNDETERMINED
50.85.	MOVE FROM WIP TO M&E	\$624,319.21	Net Book Value	\$624,319.21
50.86.	ADDITIONS TO M&E	\$15,751.02	Net Book Value	\$15,751.02
50.87.	ADDITIONS (MOSTLY M&E)	\$1,149,071.20	Net Book Value	\$1,149,071.20
50.88.	KILL FLOOR EQUIPMENT - OTHER	\$49,447.76	Net Book Value	\$49,447.76
50.89.	MPS RED MEAT SLAUGHTERING	\$2,782,450.06	Net Book Value	\$2,782,450.06

Debtor	HyLife Foods Windom, LLC	Case number (if known) 23-10521		
50.90.	JARVIS EQUIPMENT	UNDETERMINED	Net Book Value	UNDETERMINED
50.91.	HYDRAULIC POWER UNIT	UNDETERMINED	Net Book Value	UNDETERMINED
50.92.	AMMONIA REFRIGERATION SYSTEM	\$2,582,378.39	Net Book Value	\$2,582,378.39
50.93.	FABRICATION FLOOR EQUIPMENT - OTHE	\$97,039.45	Net Book Value	\$97,039.45
50.94.	STRAPPING MACHINES	UNDETERMINED	Net Book Value	UNDETERMINED
50.95.	SEALED AIR CRYOVAC MACHINES	\$551,622.37	Net Book Value	\$551,622.37
50.96.	SEALED AIR CRYOVAC ACCESSORIES	\$27,600.32	Net Book Value	\$27,600.32
50.97.	PUMP MOTOR COMBO	\$819.17	Net Book Value	\$819.17
50.98.	PICK HEATER	\$0.00	Net Book Value	UNDETERMINED
50.99.	PEARSON TRAY FORMERS	\$181,365.37	Net Book Value	\$181,365.37
50.100.	AIR CONDITIONER UNITS	\$69,056.40	Net Book Value	\$69,056.40
50.101.	MAREL TOWNSEND SKINNERS	\$28,721.82	Net Book Value	\$28,721.82
50.102.	G.E. LEBLANC - CUT FLOOR EQUIP	\$1,501,939.41	Net Book Value	\$1,501,939.41
50.103.	CW-90X PRINTER	\$0.00	Net Book Value	UNDETERMINED
50.104.	COMPUTER SOFTWARE - OTHER	\$0.00	Net Book Value	UNDETERMINED
50.105.	WERNER RSLOGIX 5000	\$0.00	Net Book Value	UNDETERMINED
50.106.	TOUGH PADS	\$0.00	Net Book Value	UNDETERMINED
50.107.	MOTOROLA PORTABLE RADIO SYSTEM	\$0.00	Net Book Value	UNDETERMINED
50.108.	LEANLOGISTICS	\$0.00	Net Book Value	UNDETERMINED
50.109.	EMAINT SOFTWARE	\$0.00	Net Book Value	UNDETERMINED
50.110.	AERATION EQUIPMENT	\$239,710.26	Net Book Value	\$239,710.26
50.111.	CAT SQUARED SOFTWARE - OTHER	\$0.00	Net Book Value	UNDETERMINED
50.112.	CAT SQUARED EQUIPMENT	\$0.00	Net Book Value	UNDETERMINED
50.113.	ASSET 4000	\$0.00	Net Book Value	UNDETERMINED
50.114.	ASPEN CANOPY	\$0.00	Net Book Value	UNDETERMINED
50.115.	COMPUTER SERVERS AND EQUIPMENT	\$0.00	Net Book Value	UNDETERMINED
50.116.	WAREHOUSE - OTHER	\$61,701.57	Net Book Value	\$61,701.57
50.117.	STRETCH WRAPPER - USED	\$0.00	Net Book Value	UNDETERMINED
50.118.	BOILER SYSTEM PROJECT	\$928,995.27	Net Book Value	\$928,995.27
50.119.	SPRINKLER SYSTEM	\$370,763.68	Net Book Value	\$370,763.68
50.120.	SCHWICKERT PROJECTS	\$499,091.04	Net Book Value	\$499,091.04
50.121.	PR20BE2161 COGNEX DM MT READER QTY 2	\$0.00	Net Book Value	UNDETERMINED
50.122.	PR20BE2161 EMKAT DATAMAX PRINTER QTY 4	\$0.00	Net Book Value	UNDETERMINED
50.123.	NIJHUIS WASTEWATER TREATMENT	\$501,259.60	Net Book Value	\$501,259.60
50.124.	PR20BE2161 EMKAT TABLETS QTY 18	\$0.00	Net Book Value	UNDETERMINED
50.125.	PR20BE2161 EMKAT TABLETS 4	\$0.00	Net Book Value	UNDETERMINED
50.126.	PR20BE2146 IN MOTION LINE #2	\$181,723.37	Net Book Value	\$181,723.37
50.127.	PR20BE2156 INTERIM BELLY IWP LINE	\$87,467.62	Net Book Value	\$87,467.62
50.128.	CONVEYOR CHAIN MODULE	\$25,675.94	Net Book Value	\$25,675.94
50.129.	PR20BE2161 CROWN LIFTS (5)	\$23,412.30	Net Book Value	\$23,412.30
50.130.	TOTE DUMPER #1	\$3,245.84	Net Book Value	\$3,245.84

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

50.131.	TABLE TOP GRINDER #2	\$0.00	Net Book Value	UNDETERMINED
50.132.	TABLE TOP GRINDER #1	\$0.00	Net Book Value	UNDETERMINED
50.133.	SHORR STRETCH WRAPPER	\$3,450.02	Net Book Value	\$3,450.02
50.134.	MILLER BEVCO STRAPPING MACHINE	\$5,155.88	Net Book Value	\$5,155.88
50.135.	HVAC UNITS	\$127,628.63	Net Book Value	\$127,628.63
50.136.	STORAGE CONTAINER	\$8,619.11	Net Book Value	\$8,619.11
50.137.	NORTHSTAR SCALE #2 AND ACCESSORIES	\$0.00	Net Book Value	UNDETERMINED
50.138.	NORTHSTAR SCALE #1 AND ACCESSORIES	\$0.00	Net Book Value	UNDETERMINED
50.139.	EMKAT CHINA PRINTER	\$0.00	Net Book Value	UNDETERMINED
50.140.	CHINA HEAD LINE	\$6,857.50	Net Book Value	\$6,857.50
50.141.	CONVEYORS UDE	\$4,049.24	Net Book Value	\$4,049.24
50.142.	CONVEYORS - CHINA PROJ	\$46,725.76	Net Book Value	\$46,725.76
50.143.	5-ROLL IN LEVEL LOADER	\$15,381.68	Net Book Value	\$15,381.68
50.144.	2-END CONTROLLED PALLET TRUCKS	\$10,445.95	Net Book Value	\$10,445.95
50.145.	SINGER DUCTWORK FOR EQUIPMENT	\$2,624.99	Net Book Value	\$2,624.99
50.146.	MEZZ PROJECT	\$78,964.94	Net Book Value	\$78,964.94
50.147.	HVAC REPLACEMENT	\$4,664.08	Net Book Value	\$4,664.08
50.148.	WHIZZARD KNIFE SYSTEM	\$31,413.75	Net Book Value	\$31,413.75
50.149.	QA EQUIPMENT FOSS	\$57,341.40	Net Book Value	\$57,341.40
50.150.	FRENCH CUT PROJECT - WHIZZARD KNIF	\$3,742.64	Net Book Value	\$3,742.64
50.151.	ELECTRICAL REMODEL	\$3,105,257.53	Net Book Value	\$3,105,257.53

**51. Total of part 8**

Add lines 47 through 50. Copy the total to line 87.

\$31,829,714.32

**52. Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**☐ No☒ Yes**Part 9: Real property****54. Does the debtor own or lease any real property?**☐ No. Go to Part 10.☒ Yes. Fill in the information below.

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

	<b>Description and location of property</b> Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	<b>Nature and extent of debtor's interest in property</b>	<b>Net book value of debtor's interest</b> (Where available)	<b>Valuation method used for current value</b>	<b>Current value of debtor's interest</b>
<b>55.</b>	<b>Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest</b>				
55.1.	_____ BUILDING IMPROVEMENTS  _____ 2850 MN-60 WINDOM MN 56101	FEE SIMPLE	\$30,573,446.52	Net Book Value	\$30,573,446.52
55.2.	_____ BUILDING PURCHASE  _____ 2850 MN-60 WINDOM MN 56101	FEE SIMPLE	\$6,408,586.77	Net Book Value	\$6,408,586.77
55.3.	_____ DUPLEX MOUNTAIN LAKE  _____ 2850 MN-60 WINDOM MN 56101	FEE SIMPLE	\$209,470.46	Net Book Value	\$209,470.46
55.4.	_____ DUPLEX MT LAKE ADD  _____ 2850 MN-60 WINDOM MN 56101	FEE SIMPLE	\$47,168.50	Net Book Value	\$47,168.50
55.5.	_____ HEINOLD - FENCE AND PADS TRAILER JC336  _____ 2850 MN-60 WINDOM MN 56101	FEE SIMPLE	\$21,777.23	Net Book Value	\$21,777.23
55.6.	_____ LAND-VARIOUS PARCELS  _____ 2850 MN-60 WINDOM MN 56101	FEE SIMPLE	\$480,000.00	Net Book Value	\$480,000.00
55.7.	_____ LAND IMPROVEMENT  _____ 2850 MN-60 WINDOM MN 56101	FEE SIMPLE	\$10,640.30	Net Book Value	\$10,640.30
55.8.	_____ PARKING LOT UPGRADE  _____ 2850 MN-60 WINDOM MN 56101	FEE SIMPLE	\$145,591.43	Net Book Value	\$145,591.43

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
--	--	--	---	------------------------------------

**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

55.9. \_\_\_\_\_ FEE SIMPLE \$95,884.40 Net Book Value \$95,884.40

PEDESTRIAN/PARKING LOT JC472

\_\_\_\_\_  
2850 MN-60  
WINDOM MN 56101

55.10. \_\_\_\_\_ FEE SIMPLE \$31,610.36 Net Book Value \$31,610.36

QA LONG TERM STORAGE

\_\_\_\_\_  
2850 MN-60  
WINDOM MN 56101

55.11. \_\_\_\_\_ FEE SIMPLE \$968,127.08 Net Book Value \$968,127.08

STOCKYARDS - SINGLE USE STRUCTURE

\_\_\_\_\_  
2850 MN-60  
WINDOM MN 56101

**56. Total of part 9**

Add the current value on lines 55. Copy the total to line 88.

\$38,992,303.05

**57. Is a depreciation schedule available for any of the property listed in Part 9?**☒ No☐ Yes**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**☐ No☒ Yes**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?**☐ No. Go to Part 11.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

**60. Patents, copyrights, trademarks, and trade secrets**

60.1. TRADEMARK 5699230 UNDETERMINED \_\_\_\_\_ UNDETERMINED

60.2. TRADEMARK 5588074 UNDETERMINED \_\_\_\_\_ UNDETERMINED

**61. Internet domain names and websites**

	Net book value of debtor's interest	Valuation method	Current value of debtor's interest
--	-------------------------------------	------------------	------------------------------------

61.1. HYLIFE.COM/WINDOM UNDETERMINED Net Book Value UNDETERMINED

61.2. COMFREYFARMS.COM UNDETERMINED Net Book Value UNDETERMINED

**62. Licenses, franchises, and royalties**

62.1. \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****63. Customer lists, mailing lists, or other compilations**

63.1. \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**64. Other intangibles, or intellectual property**

64.1. \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**65. Goodwill**

65.1. \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**66. Total of part 10**

Add lines 60 through 65. Copy the total to line 89.

UNDETERMINED

**67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?**☒ No☐ Yes**68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes**69. Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.☒ Yes. Fill in the information below.Current value of  
debtor's interest**71. Notes receivable**

Description (include name of obligor)	Total face amount	Doubtful or uncollectible amount	Current value of debtor's interest
71.1. _____	\$ _____	- \$ _____ = ..... →	\$ _____

**72. Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)	Tax refund amount	NOL amount	Tax year	Current value of debtor's interest
72.1. SEE, GLOBAL NOTES	\$ _____	\$ _____	_____	\$ _____

**73. Interests in insurance policies or annuities**

Insurance company	Insurance policy No.	Annuity issuer name	Annuity account type	Annuity account No.	Current value of debtor's interest
73.1. AIG INSURANCE COMPANY OF CANADA	DIRECTORS & OFFICERS LIABILITY POLICY NO. 06-078-93-37	_____	_____	_____	UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

73.2.	BERKSHIRE HATHAWAY SPECIALTY INSURANCE	DIRECTORS & OFFICERS LIABILITY (EXCESS) POLICY NO. 43-EMC-319574-02	_____	_____	_____	UNDETERMINED
73.3.	CRESTBROOK INSURANCE COMPANY / NATIONWIDE MUTUAL INSURANCE COMPANY	COMMERCIAL OUTPUT PROPERTY POLICY NO. COP145532A	_____	_____	_____	UNDETERMINED
73.4.	CRESTBROOK INSURANCE COMPANY / NATIONWIDE MUTUAL INSURANCE COMPANY	COMMERCIAL GENERAL LIABILITY POLICY NO. CPP145532A	_____	_____	_____	UNDETERMINED
73.5.	CRESTBROOK INSURANCE COMPANY / NATIONWIDE MUTUAL INSURANCE COMPANY	COMMERCIAL AUTOMOBILE LIABILITY POLICY NO. CPP145532A	_____	_____	_____	UNDETERMINED
73.6.	CRESTBROOK INSURANCE COMPANY / NATIONWIDE MUTUAL INSURANCE COMPANY	UMBRELLA LIABILITY POLICY NO. CU145532A	_____	_____	_____	UNDETERMINED
73.7.	NAVIGATORS INSURANCE COMPANY	EXCESS LIABILITY POLICY NO. CH23EXRZ077Y8IV	_____	_____	_____	UNDETERMINED
73.8.	STARR INDEMNITY & LIABILITY COMPANY	WORKERS' COMPENSATION POLICY NO. 1000004012	_____	_____	_____	UNDETERMINED
73.9.	LOCKTON COMPANIES LLP	EXCESS DIRECTORS AND OFFICERS AND COMPANY LIABILITY INSURANCE NO. 02-144-27-01	_____	_____	_____	UNDETERMINED
73.10.	ALLIED WORLD SPECIALTY INSURANCE COMPANY	EXCESS DIRECTORS & OFFICERS LIABILITY INSURANCE NO. 0313-7727	_____	_____	_____	UNDETERMINED

**74. Causes of action against third parties (whether or not a lawsuit has been filed)**

	Nature of claim	Amount requested	Current value of debtor's interest
74.1.	_____	\$ _____	\$ _____

**75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

	Nature of claim	Amount requested	Current value of debtor's interest
75.1.	_____	\$ _____	\$ _____

**76. Trusts, equitable or future interests in property**

76.1.	FUTURE INTERESTS IN PROPERTY	UNKNOWN
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Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****77. Other property of any kind not already listed**

Examples: Season tickets, country club membership

77.1.	MISCELLANEOUS EMPLOYEE ADVANCES	\$8,219.92
77.2.	CONSTRUCTION - WINDRIVER MANURE SYSTEM	\$247,569.88
77.3.	INTACT SURETY - LIVESTOCK DEALER BOND - 905020320	\$1,965,000.00
77.4.	EMPLOYEE WELFARE NORWOOD INN JC213	\$13,214.22
77.5.	WELFARE TRAILER JC 213 & 345	\$228,913.61
77.6.	EMP WELFARE NORWOOD INN JC246	\$199,728.58
77.7.	WELFARE TRAILER BALANCE JC99	\$266,578.77
77.8.	INTERCOMPANY RECEIVABLE DUE FROM HYF WINDOM FOR WENNSOFT	\$193,843.78
77.9.	INTERCOMPANY RECEIVABLE DUE FROM HYLIFE FOODS LP	\$890,678.99
77.10.	INTERCOMPANY RECEIVABLE DUE FROM HYLIFE FOODS INTERNATIONAL LTD	\$3,201,476.43

**78. Total of part 11**

Add lines 71 through 77. Copy the total to line 90.

\$7,215,224.18

**79. Has any of the property listed in Part 11 been appraised by a professional within the last year?**☐ No☒ Yes

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1.</i>	\$17,271,805.29	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	\$3,298,733.00	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	\$11,687,104.15	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	\$0.00	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	\$13,785,038.98	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	\$0.00	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	\$91,569.49	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	\$31,829,714.32	
88. <b>Real property.</b> <i>Copy line 56, Part 9.</i> .....	→	\$38,992,303.05
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	UNDETERMINED	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ \$7,215,224.18	
91. <b>Total.</b> Add lines 80 through 90 for each column. ....91a.	\$85,179,189.41	+ 91b. \$38,992,303.05
92. <b>Total of all property on Schedule A/B.</b> Lines 91a + 91b = 92. ....		\$124,171,492.46

**Fill in this information to identify the case:**

**Debtor name:** HyLife Foods Windom, LLC

**United States Bankruptcy Court for the:** District of Delaware

**Case number (if known):** 23-10521

☐ Check if this is an  
amended filing

Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****Column A  
Amount of  
Claim**Do not deduct  
the value of  
collateral.**Column B  
Value of  
collateral that  
supports this  
claim****2.1. Creditor's name and address**COMPEER FINANCIAL FLCA  
1921 PREMIER DRIVE  
MANKATO MN 56001**Creditor's email address, if known**  
\_\_\_\_\_**Date debt was incurred:** 5/7/2020**Last 4 digits of account number:****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.  
\_\_\_\_\_  
\_\_\_\_\_☐ Yes. The relative priority of creditors is specified on lines: \_\_\_\_\_**Describe debtor's property that is subject to a lien**

ALL ASSETS AND PERSONAL PROPERTY OF THE DEBTOR WHETHER NOW OWNED AND/OR HEREAFTER ACQUIRED, AND ALL PROCEEDS OF THE FOREGOING

\$69,401,846.00

UNDETERMINED

**Describe the lien**

UCC-1 RECORDED 5/7/2020 IN STATE OF MINNESOTA AS DOCUMENT NO. 1158135400026 AND AS AMENDED 6/16/2020 BY DOCUMENT NO. 1158135400026

**Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:**  
Check all that apply.☒ Contingent☒ Unliquidated☒ Disputed

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.2.	<b>Creditor's name and address</b>  COMPEER FINANCIAL FLCA 1921 PREMIER DRIVE MANKATO MN 56001  <b>Creditor's email address, if known</b> <hr/> <b>Date debt was incurred:</b> 5/7/2020 <b>Last 4 digits of account number:</b> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <hr/> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<b>Describe debtor's property that is subject to a lien</b>  ALL ASSETS AND PERSONAL PROPERTY OF THE DEBTOR WHETHER NOW OWNED AND/OR HEREAFTER ACQUIRED, AND ALL PROCEEDS OF THE FOREGOING  <b>Describe the lien</b> UCC-1 RECORDED 5/7/2020 IN STATE OF MINNESOTA AS DOCUMENT NO. 1158135400026 AND AS AMENDED 6/16/2020 BY DOCUMENT NO. 1158135400026  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$18,000,000.00    UNDETERMINED
2.3.	<b>Creditor's name and address</b>  COMPEER FINANCIAL PCA COMPEER FINANCIAL FLCA 1921 PREMIER DRIVE MANKATO MN 56001  <b>Creditor's email address, if known</b> <hr/> <b>Date debt was incurred:</b> 5/7/2020 <b>Last 4 digits of account number:</b> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <hr/> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<b>Describe debtor's property that is subject to a lien</b>  ALL ASSETS AND PERSONAL PROPERTY OF THE DEBTOR WHETHER NOW OWNED AND/OR HEREAFTER ACQUIRED, AND ALL PROCEEDS OF THE FOREGOING  <b>Describe the lien</b> UCC-1 RECORDED 5/7/2020 IN STATE OF MINNESOTA AS DOCUMENT NO. 1158135400026 AND AS AMENDED 6/16/2020 BY DOCUMENT NO. 1158135400026  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$26,000,000.00    UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

<b>2.4. Creditor's name and address</b>  ROBERT REISER AND COMPANY 725 DEDHAM STREET CANTON MA 02021  <b>Creditor's email address, if known</b> _____  <b>Date debt was incurred:</b> 3/15/2022  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____	<b>Describe debtor's property that is subject to a lien</b>  ONE SUPERVAC MODEL GK862B                      \$1,081.58                      UNDETERMINED AUTOMATIC BELT CHAMBER MACHINE  <b>Describe the lien</b> UCC-1 RECORDED 3/15/2022 IN STATE OF MINNESOTA AS DOCUMENT NO. 1303128801281  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
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3. **Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.** **\$113,402,927.58**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

	Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
3.1.	COMPEER FINANCIAL FLCA PO BOX 4459 MANKATO MN 56002	Line 2.3	_____
3.2.	COMPEER FINANCIAL PCA PO BOX 4459 MANKATO MN 56002	Line 2.3	_____
3.3.	COMPEER FINANCIAL PCA PO BOX 4459 MANKATO MN 56002	Line 2.1	_____
3.4.	COMPEER FINANCIAL PCA PO BOX 4459 MANKATO MN 56002	Line 2.2	_____

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.5.	ROBERT REISER & COMPANY 1549 YORKTON COURT UNIT # 4 BURLINGTON, ON L7P 5B7 CANADA	Line 2.4	_____
3.6.	STINSON LLP ADAM NATHE 50 SOUTH SIXTH STREET SUITE 2600 MINNEAPOLIS MN 55402	Line 2.3	_____
3.7.	STINSON LLP ADAM NATHE 50 SOUTH SIXTH STREET SUITE 2600 MINNEAPOLIS MN 55402	Line 2.1	_____
3.8.	STINSON LLP ADAM NATHE 50 SOUTH SIXTH STREET SUITE 2600 MINNEAPOLIS MN 55402	Line 2.2	_____
3.9.	STINSON LLP ANDREW J GLASNOVICH 50 SOUTH SIXTH ST.,STE 2600 MINNEAPOLIS MN 55402	Line 2.3	_____
3.10.	STINSON LLP ANDREW J GLASNOVICH 50 SOUTH SIXTH ST.,STE 2600 MINNEAPOLIS MN 55402	Line 2.1	_____
3.11.	STINSON LLP ANDREW J GLASNOVICH 50 SOUTH SIXTH ST.,STE 2600 MINNEAPOLIS MN 55402	Line 2.2	_____
3.12.	STINSON LLP EDWIN H CALDIE 50 SOUTH SIXTH STREET SUITE 2600 MINNEAPOLIS MN 55402	Line 2.3	_____
3.13.	STINSON LLP EDWIN H CALDIE 50 SOUTH SIXTH STREET SUITE 2600 MINNEAPOLIS MN 55402	Line 2.1	_____
3.14.	STINSON LLP EDWIN H CALDIE 50 SOUTH SIXTH STREET SUITE 2600 MINNEAPOLIS MN 55402	Line 2.2	_____
3.15.	WOMBLE BOND DICKINSON (US) LLP MATTHEW WARD 1313 NORTH MARKET STREET SUITE 1200 WILMINGTON DE 19801	Line 2.3	_____
3.16.	WOMBLE BOND DICKINSON (US) LLP MATTHEW WARD 1313 NORTH MARKET STREET SUITE 1200 WILMINGTON DE 19801	Line 2.1	_____

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.17.	WOMBLE BOND DICKINSON (US) LLP MATTHEW WARD 1313 NORTH MARKET STREET SUITE 1200 WILMINGTON DE 19801	Line 2.2	_____
3.18.	WOMBLE BOND DICKINSON (US) LLP MORGAN L PATTERSON 1313 NORTH MARKET ST.,STE 1200 WILMINGTON DE 19801	Line 2.3	_____
3.19.	WOMBLE BOND DICKINSON (US) LLP MORGAN L PATTERSON 1313 NORTH MARKET ST.,STE 1200 WILMINGTON DE 19801	Line 2.1	_____
3.20.	WOMBLE BOND DICKINSON (US) LLP MORGAN L PATTERSON 1313 NORTH MARKET ST.,STE 1200 WILMINGTON DE 19801	Line 2.2	_____

**Fill in this information to identify the case:****Debtor name:** HyLife Foods Windom, LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 23-10521☐ Check if this is an amended filing

Official Form 206E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1. <b>Priority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>Total claim</b>	<b>Priority amount</b>
ABANIL, JEROME Address Intentionally Omitted	<i>Check all that apply.</i>	UNDETERMINED	UNDETERMINED
	<input checked="" type="checkbox"/> Contingent		<b>Nonpriority amount</b>
	<input checked="" type="checkbox"/> Unliquidated		UNDETERMINED
	<input checked="" type="checkbox"/> Disputed		
<b>Date or dates debt was incurred</b>	<b>Basis for the claim:</b>		
VARIOUS	ACCRUED WAGES & PTO		
<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b>		
<b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
2.2. <b>Priority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b>	<b>Total claim</b>	<b>Priority amount</b>
ABELSON, ERIC Address Intentionally Omitted	<i>Check all that apply.</i>	UNDETERMINED	UNDETERMINED
	<input checked="" type="checkbox"/> Contingent		<b>Nonpriority amount</b>
	<input checked="" type="checkbox"/> Unliquidated		UNDETERMINED
	<input checked="" type="checkbox"/> Disputed		
<b>Date or dates debt was incurred</b>	<b>Basis for the claim:</b>		
VARIOUS	ACCRUED WAGES & PTO		
<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b>		
<b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.3.	<b>Priority creditor's name and mailing address</b>  ABRAHAM, FLOR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.4.	<b>Priority creditor's name and mailing address</b>  ABUAN, JEFFREY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.5.	<b>Priority creditor's name and mailing address</b>  AGUILAR HERNANDEZ, JUAN D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									

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2.6.	<b>Priority creditor's name and mailing address</b>  AGUILAR HERNANDEZ, RAUL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.7.	<b>Priority creditor's name and mailing address</b>  AGUILUZ, MIRNA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.8.	<b>Priority creditor's name and mailing address</b>  AGUIRRE SIFUENTES, BENITO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.9.	<b>Priority creditor's name and mailing address</b>  AGUIRRE, ELIA L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.10.	<b>Priority creditor's name and mailing address</b>  AGUSTIN PELICO, MELISSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.11.	<b>Priority creditor's name and mailing address</b>  AGUSTINES, LEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.12.	<b>Priority creditor's name and mailing address</b>  ALEMU, AZEB Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.13.	<b>Priority creditor's name and mailing address</b>  ALFARO MELENDEZ, ANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.14.	<b>Priority creditor's name and mailing address</b>  ALFARO RIOS, JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.15.	<b>Priority creditor's name and mailing address</b>  ALFILER, RAYMUND Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.16.	<b>Priority creditor's name and mailing address</b>  ALFONSO MARTINEZ, SOONER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.17.	<b>Priority creditor's name and mailing address</b>  ALLEN, NORMAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.18.	<b>Priority creditor's name and mailing address</b>  ALMANZA MARTINEZ, RENATA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.19.	<b>Priority creditor's name and mailing address</b>  ALONSO ROCILLO, MIGUEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.20.	<b>Priority creditor's name and mailing address</b>  ALONSO TIERRABLANCA, FERNANDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Nonpriority amount										
UNDETERMINED										

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2.21.	<b>Priority creditor's name and mailing address</b>  ALVARADO SANCHEZ, JOSUE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.22.	<b>Priority creditor's name and mailing address</b>  ALVAREZ CRUZ, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.23.	<b>Priority creditor's name and mailing address</b>  ALVAREZ, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.24.	<b>Priority creditor's name and mailing address</b>  ALVAREZ, ESMERALDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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Nonpriority amount										
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2.25.	<b>Priority creditor's name and mailing address</b>  ALVAREZ, JOSE L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.26.	<b>Priority creditor's name and mailing address</b>  ALVAREZ, JOSEPH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.27.	<b>Priority creditor's name and mailing address</b>  ALVAREZ, MARICELA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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2.28.	<b>Priority creditor's name and mailing address</b>  ALVAREZ, SUSANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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2.29.	<b>Priority creditor's name and mailing address</b>  AMBO, JOSHUA A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Nonpriority amount										
UNDETERMINED										

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2.30.	<b>Priority creditor's name and mailing address</b>  AMEZCUA, OSCAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.31.	<b>Priority creditor's name and mailing address</b>  ANDERSON, BRADLEY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.32.	<b>Priority creditor's name and mailing address</b>  ANDERSON, JOSEPH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.33.	<b>Priority creditor's name and mailing address</b>  ANDERSON, ROBBY R. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.34.	<b>Priority creditor's name and mailing address</b>  ANDOH, JANE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.35.	<b>Priority creditor's name and mailing address</b>  ANDRADE GODINEZ, NATALIA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.36.	<b>Priority creditor's name and mailing address</b>  ANDRADE PANIAGUA, ANA I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.37.	<b>Priority creditor's name and mailing address</b>  ANGEL ARELLANO, ALFREDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
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2.38.	<b>Priority creditor's name and mailing address</b>  ANINON, REJAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Nonpriority amount										
UNDETERMINED										

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2.39.	<b>Priority creditor's name and mailing address</b>  APARICIO HERNANDEZ, DANIELA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.40.	<b>Priority creditor's name and mailing address</b>  ARAUJO IBARRA, FERNANDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.41.	<b>Priority creditor's name and mailing address</b>  ARCE JIMENEZ, JOSE M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
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UNDETERMINED									

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.42.	<b>Priority creditor's name and mailing address</b>  AREVALO, FRANKLIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.43.	<b>Priority creditor's name and mailing address</b>  AREVALO, LINDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.44.	<b>Priority creditor's name and mailing address</b>  ARINHAKOUNE, TONY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.45.	<b>Priority creditor's name and mailing address</b>  ARREDONDO, ERICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.46.	<b>Priority creditor's name and mailing address</b>  ARROYO CARDOSO, DANIEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.47.	<b>Priority creditor's name and mailing address</b>  ASCENCIO WILMES, MYRNA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.48.	<b>Priority creditor's name and mailing address</b>  AUCES, BIANCA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.49.	<b>Priority creditor's name and mailing address</b>  AUNG, TON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.50.	<b>Priority creditor's name and mailing address</b>  AVALOS ANDRADE, JOSE J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.51.	<b>Priority creditor's name and mailing address</b>  AVALOS SANCHEZ, JOSE G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.52.	<b>Priority creditor's name and mailing address</b>  AVILA ANDRADE, HELIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.53.	<b>Priority creditor's name and mailing address</b>  AVILA DIAZ, ELFIDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.54.	<b>Priority creditor's name and mailing address</b>  AVILA FLORES, MARIA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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2.55.	<b>Priority creditor's name and mailing address</b>  AVILA FLORES, MARIA R. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.56.	<b>Priority creditor's name and mailing address</b>  AVILA HERNANDEZ, EDGAR A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.57.	<b>Priority creditor's name and mailing address</b>  AVILA HERNANDEZ, JOSE E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.58.	<b>Priority creditor's name and mailing address</b>  AVILA OLVERA, LORENZO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.59.	<b>Priority creditor's name and mailing address</b>  AVILA RUIZ, MARIA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.60.	<b>Priority creditor's name and mailing address</b>  AVILA ULLOA, BERENICE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.61.	<b>Priority creditor's name and mailing address</b>  AYUDTUD, NONEMARK Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Nonpriority amount										
UNDETERMINED										
2.62.	<b>Priority creditor's name and mailing address</b>  BAKKEN, LENNY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.63.	<b>Priority creditor's name and mailing address</b>  BALTAZAR FELIX, VIRGINIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.64.	<b>Priority creditor's name and mailing address</b>  BARAJAS, ALFREDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.65.	<b>Priority creditor's name and mailing address</b>  BARRERA CURTIDOR, HUGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.66.	<b>Priority creditor's name and mailing address</b>  BARRERA GARCIA, GABINO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.67.	<b>Priority creditor's name and mailing address</b>  BARRERA GARCIA, JUAN J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.68.	<b>Priority creditor's name and mailing address</b>  BARRERA, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.69.	<b>Priority creditor's name and mailing address</b>  BARRERA, JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.70.	<b>Priority creditor's name and mailing address</b>  BARROSO RAMIREZ, FATIMA SUSANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.71.	<b>Priority creditor's name and mailing address</b>  BARTOLON SEBASTIAN, TERESA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.72.	<b>Priority creditor's name and mailing address</b>  BASALUA RAMOS JR., ESEQUIEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.73.	<b>Priority creditor's name and mailing address</b>  BAUSIN, RENANTE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.74.	<b>Priority creditor's name and mailing address</b>  BAUTISTA BURGOS, JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.75.	<b>Priority creditor's name and mailing address</b>  BEALL, BRIGITTE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.76.	<b>Priority creditor's name and mailing address</b>  BECERRA VAZQUEZ, ANAYELLI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.77.	<b>Priority creditor's name and mailing address</b>  BENAVIDEZ, MIGUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.78.	<b>Priority creditor's name and mailing address</b>  BENITEZ RIVERA, JOSE M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.79.	<b>Priority creditor's name and mailing address</b>  BENITEZ, ESTRIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.80.	<b>Priority creditor's name and mailing address</b>  BENSON, VICKIE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.81.	<b>Priority creditor's name and mailing address</b>  BENTSON, EMILY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.82.	<b>Priority creditor's name and mailing address</b>  BERMEJO, MARK Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.83.	<b>Priority creditor's name and mailing address</b>  BERMUDEZ, JESSICA L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.84.	<b>Priority creditor's name and mailing address</b>  BERNAL CANTU, JUSTIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.85.	<b>Priority creditor's name and mailing address</b>  BERNAL, MARTA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.86.	<b>Priority creditor's name and mailing address</b>  BETANCE SOLTERO, MANUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.87.	<b>Priority creditor's name and mailing address</b>  BEUKEMA, BRANDI L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.88.	<b>Priority creditor's name and mailing address</b>  BLOCK, STEVEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.89.	<b>Priority creditor's name and mailing address</b>  BOCANEGRA BARRERA, JOSUE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.90.	<b>Priority creditor's name and mailing address</b>  BOJOS, JONEL Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.91.	<b>Priority creditor's name and mailing address</b>  BONILLA, FRANCISCO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.92.	<b>Priority creditor's name and mailing address</b>  BONUS, JHONAS Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.93.	<b>Priority creditor's name and mailing address</b>  BORGA, ROSEMARIE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.94.	<b>Priority creditor's name and mailing address</b>  BOTELLO MEZA, JORGE L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.95.	<b>Priority creditor's name and mailing address</b>  BOTICARIO, LILIBETH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.96.	<b>Priority creditor's name and mailing address</b>  BOUNMANY, CHANTHALANGSY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.97.	<b>Priority creditor's name and mailing address</b>  BOWERS, CHRISTOPHER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.98.	<b>Priority creditor's name and mailing address</b>  BREA MARTINEZ, VICENTE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									

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2.99.	<b>Priority creditor's name and mailing address</b>  BRILLER, ARIEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.100.	<b>Priority creditor's name and mailing address</b>  BRIONES, REDEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.101.	<b>Priority creditor's name and mailing address</b>  BRISENO, BENJAMIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.102.	<b>Priority creditor's name and mailing address</b>  BROWN, DOMINIQUE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.103.	<b>Priority creditor's name and mailing address</b>  BUNE, WEGEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.104.	<b>Priority creditor's name and mailing address</b>  BURDEN, SHAWN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.105.	<b>Priority creditor's name and mailing address</b>  CABALLERO ARRONA, CLAUDIA I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.106.	<b>Priority creditor's name and mailing address</b>  CABALLERO MEDINA, LUIS M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.107.	<b>Priority creditor's name and mailing address</b>  CABALLERO-CENDEJAS, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.108.	<b>Priority creditor's name and mailing address</b>  CABOTAJE, CROICHE JIM Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
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2.109.	<b>Priority creditor's name and mailing address</b>  CABRERA TAVAREZ, BRAYAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.110.	<b>Priority creditor's name and mailing address</b>  CABRERA TAVAREZ, ODAVEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.111.	<b>Priority creditor's name and mailing address</b>  CABRERA TORRES, KEVIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.112.	<b>Priority creditor's name and mailing address</b>  CACIQUE IBARRA, HERIBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.113.	<b>Priority creditor's name and mailing address</b>  CADACIO, JOHN NATHANIEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.114.	<b>Priority creditor's name and mailing address</b>  CAJATE, JAMES Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.115.	<b>Priority creditor's name and mailing address</b>  CALDERON CABRERA, LUZ M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.116.	<b>Priority creditor's name and mailing address</b>  CALDERON FLORES, JULIO C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.117.	<b>Priority creditor's name and mailing address</b>  CALDERON GUTIERREZ, GIOVANNI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.118.	<b>Priority creditor's name and mailing address</b>  CALDERON GUTIERREZ, MARIA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.119.	<b>Priority creditor's name and mailing address</b>  CALDERON HERNANDEZ, CESAR R. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										

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2.120.	<b>Priority creditor's name and mailing address</b>  CALDERON LOPEZ, MARIA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.121.	<b>Priority creditor's name and mailing address</b>  CALDERON PINA, JOSE M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.122.	<b>Priority creditor's name and mailing address</b>  CALDERON RAMIREZ, AARON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.123.	<b>Priority creditor's name and mailing address</b>  CALDERON VALENZUELA, YERENICK Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.124.	<b>Priority creditor's name and mailing address</b>  CALICDAN, BRYAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.125.	<b>Priority creditor's name and mailing address</b>  CALIFORNIA FRANCHISE TAX BOARD PO BOX 942857 SACRAMENTO CA 94257  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (8)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  TAXES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.126.	<b>Priority creditor's name and mailing address</b>  CAMACHO, RAMON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.127.	<b>Priority creditor's name and mailing address</b>  CAMARGO LOPEZ, DONOVAN R. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.128.	<b>Priority creditor's name and mailing address</b>  CAMPOS MALDONADO, BRAULIO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.129.	<b>Priority creditor's name and mailing address</b>  CAMPOS MURILLO, ROSARIO S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.130.	<b>Priority creditor's name and mailing address</b>  CAMPOS ROSILLO, IVAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.131.	<b>Priority creditor's name and mailing address</b>  CAMPOS VELAZQUEZ, DIEGO E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.132.	<b>Priority creditor's name and mailing address</b>  CAMPOS VELAZQUEZ, JUAN A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.133.	<b>Priority creditor's name and mailing address</b>  CAMPOS, CRISTINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.134.	<b>Priority creditor's name and mailing address</b>  CANADA, JOAQUIN J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.135.	<b>Priority creditor's name and mailing address</b>  CANALES SANCHEZ, YAZMIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.136.	<b>Priority creditor's name and mailing address</b>  CANO, RAUL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.137.	<b>Priority creditor's name and mailing address</b>  CANON, JEFFREY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.138.	<b>Priority creditor's name and mailing address</b>  CANONIZADO, CARLO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.139.	<b>Priority creditor's name and mailing address</b>  CANTERO CARDONA, JOSE B. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.140.	<b>Priority creditor's name and mailing address</b>  CARAPIA MANDUJANO, CINDY L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.141.	<b>Priority creditor's name and mailing address</b>  CARDENAS PALACIOS, JUAN G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.142.	<b>Priority creditor's name and mailing address</b>  CARDENAS PALACIOS, OSCAR F. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.143.	<b>Priority creditor's name and mailing address</b>  CARDONA LOPEZ, JORGE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.144.	<b>Priority creditor's name and mailing address</b>  CARDOSO ABONCE, Nanci Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.145.	<b>Priority creditor's name and mailing address</b>  CARDOSO BARRIOS, ANA L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.146.	<b>Priority creditor's name and mailing address</b>  CARDOSO CORONA, MARYCRUZ Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.147.	<b>Priority creditor's name and mailing address</b>  CARDOSO PEREZ, ALEJANDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.148.	<b>Priority creditor's name and mailing address</b>  CARDOSO SANCHEZ, JOSE C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.149.	<b>Priority creditor's name and mailing address</b>  CARMEN LOPEZ, SONIA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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UNDETERMINED										

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2.150.	<b>Priority creditor's name and mailing address</b>  CARMONA MEDRANO, BRANDON G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.151.	<b>Priority creditor's name and mailing address</b>  CARMONA PATINO, JUAN C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.152.	<b>Priority creditor's name and mailing address</b>  CARPENTIER, SANDRA J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.153.	<b>Priority creditor's name and mailing address</b>  CARRERO RUIZ, ALEXIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.154.	<b>Priority creditor's name and mailing address</b>  CASANOVA, OMAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.155.	<b>Priority creditor's name and mailing address</b>  CASAS ALVARADO, GUADALUPE V. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.156.	<b>Priority creditor's name and mailing address</b>  CASTILLO HERNANDEZ, MARIA S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.157.	<b>Priority creditor's name and mailing address</b>  CASTILLO YEPEZ, JOSE L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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2.158.	<b>Priority creditor's name and mailing address</b>  CASTILLO, GABRIELA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.159.	<b>Priority creditor's name and mailing address</b>  CASTRO, ALEXANDRA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.160.	<b>Priority creditor's name and mailing address</b>  CAZARES LARA, ANDRES Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.161.	<b>Priority creditor's name and mailing address</b>  CAZARES, YOLANDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.162.	<b>Priority creditor's name and mailing address</b>  CENDEJAS ORDAZ, ARTURO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.163.	<b>Priority creditor's name and mailing address</b>  CERDA RAMOS, RAMIRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.164.	<b>Priority creditor's name and mailing address</b>  CERDA RODRIGUEZ, ROSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.165.	<b>Priority creditor's name and mailing address</b>  CERON, ESTRELLA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.166.	<b>Priority creditor's name and mailing address</b>  CERVANTES GARCIA, JORGE A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.167.	<b>Priority creditor's name and mailing address</b>  CERVANTES GARCIA, MARCO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.168.	<b>Priority creditor's name and mailing address</b>  CEVERINO HERNANDEZ, ESMERALDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.169.	<b>Priority creditor's name and mailing address</b>  CHAKVONG, KAEW Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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2.170.	<b>Priority creditor's name and mailing address</b>  CHAKVONG, LATDAVONE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.171.	<b>Priority creditor's name and mailing address</b>  CHAM, CHAM Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.172.	<b>Priority creditor's name and mailing address</b>  CHAMORRO CUBILLE, EDGARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.173.	<b>Priority creditor's name and mailing address</b>  CHAMPALATH, ADD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.174.	<b>Priority creditor's name and mailing address</b>  CHAMPALATH, OUDONE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.175.	<b>Priority creditor's name and mailing address</b>  CHAVEZ CHAVEZ, ANGEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.176.	<b>Priority creditor's name and mailing address</b>  CHAVEZ HERNANDEZ, PEDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.177.	<b>Priority creditor's name and mailing address</b>  CHAVEZ LULE, ADELA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.178.	<b>Priority creditor's name and mailing address</b>  CHILEL CHAVEZ, HUGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.179.	<b>Priority creditor's name and mailing address</b>  CIRLOS, KORAYMA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.180.	<b>Priority creditor's name and mailing address</b>  CISNEROS LOPEZ, LUCIANO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.181.	<b>Priority creditor's name and mailing address</b>  CISNEROS MAGANA, EMMA C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.182.	<b>Priority creditor's name and mailing address</b>  CISNEROS ROSAS, MARIELA C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.183.	<b>Priority creditor's name and mailing address</b>  CLANTON, JACKSON P. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.184.	<b>Priority creditor's name and mailing address</b>  CLARIDAD, JUDY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.185.	<b>Priority creditor's name and mailing address</b>  CLARO, MARC JOSHUA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.186.	<b>Priority creditor's name and mailing address</b>  CLEM, ALLISON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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2.187.	<b>Priority creditor's name and mailing address</b>  COLLIN, BLAINE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.188.	<b>Priority creditor's name and mailing address</b>  COMEAU, VINTON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Nonpriority amount										
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2.189.	<b>Priority creditor's name and mailing address</b>  CONCEPCION COLON, OSVALDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.190.	<b>Priority creditor's name and mailing address</b>  CONSTANTINO, WILFREDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.191.	<b>Priority creditor's name and mailing address</b>  CONTRERAS DIAZ, FRANCISCO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.192.	<b>Priority creditor's name and mailing address</b>  CONTRERAS SANEUX, ANTONY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.193.	<b>Priority creditor's name and mailing address</b>  CONTRERAS SANEUX, FRANKLIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.194.	<b>Priority creditor's name and mailing address</b>  CORCHADO, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.195.	<b>Priority creditor's name and mailing address</b>  CORNEJO CORNEJO, DIEGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.196.	<b>Priority creditor's name and mailing address</b>  CORNEJO HERNANDEZ, JOSE A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.197.	<b>Priority creditor's name and mailing address</b>  CORONA PEREZ, CLAUDIA S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.198.	<b>Priority creditor's name and mailing address</b>  CORTES AGUILAR, JOSE A. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.199.	<b>Priority creditor's name and mailing address</b>  CORTES GARCIA, JOSE D. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.200.	<b>Priority creditor's name and mailing address</b>  COSTALES, JULIO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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Nonpriority amount										
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Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.201.	<b>Priority creditor's name and mailing address</b>  COTTENWOOD COUNTRY AUDITOR/TREASURER 900 3RD AVE WINDOM MN 56101  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (8)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  TAXES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f2f2f2; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.202.	<b>Priority creditor's name and mailing address</b>  CROWELL, JESSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f2f2f2; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.203.	<b>Priority creditor's name and mailing address</b>  CRUZ CHAVEZ, LUIS A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f2f2f2; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.204.	<b>Priority creditor's name and mailing address</b>  CRUZ FRIAS, DAVID Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.205.	<b>Priority creditor's name and mailing address</b>  CRUZ SALAS, NAYELI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.206.	<b>Priority creditor's name and mailing address</b>  CRUZ SANTANA, ELY Y. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.207.	<b>Priority creditor's name and mailing address</b>  CUEVAS, JOEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.208.	<b>Priority creditor's name and mailing address</b>  CUNAN, ARLENE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.209.	<b>Priority creditor's name and mailing address</b>  DAVILA VEGUILLA, VIVIAM Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.210.	<b>Priority creditor's name and mailing address</b>  DE JULIAN ARREGUIN, GUSTAVO E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.211.	<b>Priority creditor's name and mailing address</b>  DE LA ROSA, NIEVES Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.212.	<b>Priority creditor's name and mailing address</b>  DE LEON CORDERO, ANGEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.213.	<b>Priority creditor's name and mailing address</b>  DE SOLA, CANDY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.214.	<b>Priority creditor's name and mailing address</b>  DE SOLA, ROMAR S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.215.	<b>Priority creditor's name and mailing address</b>  DEL TORO MONDRAGON, GIOVANI F. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.216.	<b>Priority creditor's name and mailing address</b>  DEPOVER, PHILIP A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.217.	<b>Priority creditor's name and mailing address</b>  DEQUITO, DARWIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.218.	<b>Priority creditor's name and mailing address</b>  DEQUITO, VANESSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.219.	<b>Priority creditor's name and mailing address</b>  DIAZ CASTRO, JOSE MANUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.220.	<b>Priority creditor's name and mailing address</b>  DIAZ HERNANDEZ, MARITZA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.221.	<b>Priority creditor's name and mailing address</b>  DIAZ PETERS, JOCELYN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.222.	<b>Priority creditor's name and mailing address</b>  DIAZ, ADRIAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.223.	<b>Priority creditor's name and mailing address</b>  DIAZ, KEVIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.224.	<b>Priority creditor's name and mailing address</b>  DIEGUEZ, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.225.	<b>Priority creditor's name and mailing address</b>  DIEGUEZ, PEDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.226.	<b>Priority creditor's name and mailing address</b>  DILLON, VENETIA A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.227.	<b>Priority creditor's name and mailing address</b>  DIMMEL, DEREK TODD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.228.	<b>Priority creditor's name and mailing address</b>  DITTMAN, DUSTYNE LYNN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.229.	<b>Priority creditor's name and mailing address</b>  DIVAS ALCANTARA, SADVIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.230.	<b>Priority creditor's name and mailing address</b>  DOMINGUEZ MARTINEZ, JUAN A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.231.	<b>Priority creditor's name and mailing address</b>  DOMINGUEZ, JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.232.	<b>Priority creditor's name and mailing address</b>  DON JUAN GUERRERO, ENRIQUE S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.233.	<b>Priority creditor's name and mailing address</b>  DOUGHERTY, SCOTT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.234.	<b>Priority creditor's name and mailing address</b>  DOVERTE, JAYPEE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.235.	<b>Priority creditor's name and mailing address</b>  DUENES, BRENDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.236.	<b>Priority creditor's name and mailing address</b>  DURAN-ROSAS, ALVARO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.237.	<b>Priority creditor's name and mailing address</b>  DURON CANEDO, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.238.	<b>Priority creditor's name and mailing address</b>  ECHEVARRIA SANTIAGO, CHRISTOPHER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.239.	<b>Priority creditor's name and mailing address</b>  ECHEVARRIA VELEZ, GUILLERMO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.240.	<b>Priority creditor's name and mailing address</b>  ECKERSON, JERRY Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.241.	<b>Priority creditor's name and mailing address</b>  EIRIKSSON, THOR Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.242.	<b>Priority creditor's name and mailing address</b>  ELANGOS, ALADIN Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.243.	<b>Priority creditor's name and mailing address</b>  ERVINE, ROGER W. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.244.	<b>Priority creditor's name and mailing address</b>  ESCALANTE GONZALEZ, LEYDI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.245.	<b>Priority creditor's name and mailing address</b>  ESCAMILLA, BEATRIZ Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.246.	<b>Priority creditor's name and mailing address</b>  ESCOBEDO GONZALEZ, PATRICIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.247.	<b>Priority creditor's name and mailing address</b>  ESPARZA, HECTOR J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.248.	<b>Priority creditor's name and mailing address</b>  ESPINOZA, KASSANDRA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.249.	<b>Priority creditor's name and mailing address</b>  ESTRELLA AGUILAR, NANCY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.250.	<b>Priority creditor's name and mailing address</b>  ESTRELLA SOTO, OLAF Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.251.	<b>Priority creditor's name and mailing address</b>  ESTUDILLO CRAVIOTTO, LAURA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.252.	<b>Priority creditor's name and mailing address</b>  ETSE, NOAMESSI K. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.253.	<b>Priority creditor's name and mailing address</b>  EZEQUAL, AUNDREY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.254.	<b>Priority creditor's name and mailing address</b>  FARBER, ROBERT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.255.	<b>Priority creditor's name and mailing address</b>  FARBER, SCOTT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.256.	<b>Priority creditor's name and mailing address</b>  FELIX GABRIEL, IMER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.257.	<b>Priority creditor's name and mailing address</b>  FELIX, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.258.	<b>Priority creditor's name and mailing address</b>  FELIX, RAFINE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.259.	<b>Priority creditor's name and mailing address</b>  FIGUEROA FIGUEROA, MIGUEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.260.	<b>Priority creditor's name and mailing address</b>  FISSEHAYE, REZENE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.261.	<b>Priority creditor's name and mailing address</b>  FISSIHA, SENAIT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.262.	<b>Priority creditor's name and mailing address</b>  FLORES CARDENAS, ERNESTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.263.	<b>Priority creditor's name and mailing address</b>  FLORES GONZALEZ, JUAN M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.264.	<b>Priority creditor's name and mailing address</b>  FLORES GUTIERREZ, JESUS A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.265.	<b>Priority creditor's name and mailing address</b>  FLORES III, JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.266.	<b>Priority creditor's name and mailing address</b>  FLORES MANCERA, ROBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.267.	<b>Priority creditor's name and mailing address</b>  FLORES VAZQUEZ, JOEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.268.	<b>Priority creditor's name and mailing address</b>  FLORES, AMADO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.269.	<b>Priority creditor's name and mailing address</b>  FLORES, DEREK Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.270.	<b>Priority creditor's name and mailing address</b>  FLORES, ERNESTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.271.	<b>Priority creditor's name and mailing address</b>  FLORES, GERMINIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.272.	<b>Priority creditor's name and mailing address</b>  FLORES, JENNIFER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.273.	<b>Priority creditor's name and mailing address</b>  FLORES, VERONICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.274.	<b>Priority creditor's name and mailing address</b>  FONSECA HERNANDEZ, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.275.	<b>Priority creditor's name and mailing address</b>  FRAUSTO, GERARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.276.	<b>Priority creditor's name and mailing address</b>  FUENTES PEREZ, JOSE R. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.277.	<b>Priority creditor's name and mailing address</b>  FUENTES, JUAN Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.278.	<b>Priority creditor's name and mailing address</b>  FUENTES, MELISSA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.279.	<b>Priority creditor's name and mailing address</b>  FUENTES, SANDRA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.280.	<b>Priority creditor's name and mailing address</b>  G MEDHIN, TILAHUN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.281.	<b>Priority creditor's name and mailing address</b>  GALER, DUSTAN BRADLEY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.282.	<b>Priority creditor's name and mailing address</b>  GALLARDO GARCIA, JOSE S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.283.	<b>Priority creditor's name and mailing address</b>  GALLARDO LAGUNAS, OSCAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.284.	<b>Priority creditor's name and mailing address</b>  GALLEGOS, SUSANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.285.	<b>Priority creditor's name and mailing address</b>  GALVAN RAMIREZ, GILBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.286.	<b>Priority creditor's name and mailing address</b>  GALVAN RODRIGUEZ, CARMEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.287.	<b>Priority creditor's name and mailing address</b>  GANG, MAKUR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.288.	<b>Priority creditor's name and mailing address</b>  GARCIA ALVAREZ, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.289.	<b>Priority creditor's name and mailing address</b>  GARCIA AVILA, MARIA S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.290.	<b>Priority creditor's name and mailing address</b>  GARCIA CERVANTES, ANTONIO D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.291.	<b>Priority creditor's name and mailing address</b>  GARCIA FLORES, DAVID Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.292.	<b>Priority creditor's name and mailing address</b>  GARCIA GALLARDO, MARIA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.293.	<b>Priority creditor's name and mailing address</b>  GARCIA GAMA, VALENTIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.294.	<b>Priority creditor's name and mailing address</b>  GARCIA GARZA, MARIA L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.295.	<b>Priority creditor's name and mailing address</b>  GARCIA JR., ORACIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.296.	<b>Priority creditor's name and mailing address</b>  GARCIA MENDOZA, MIGUEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.297.	<b>Priority creditor's name and mailing address</b>  GARCIA ORTEGA, ANGEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.298.	<b>Priority creditor's name and mailing address</b>  GARCIA PATINO, EDGAR A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.299.	<b>Priority creditor's name and mailing address</b>  GARCIA POCASANGRE, XENIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.300.	<b>Priority creditor's name and mailing address</b>  GARCIA RODRIGUEZ, ANA S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.301.	<b>Priority creditor's name and mailing address</b>  GARCIA SAMANO, ROBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.302.	<b>Priority creditor's name and mailing address</b>  GARCIA SANTOYO, DANIEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.303.	<b>Priority creditor's name and mailing address</b>  GARCIA SIFUENTES, DIANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.304.	<b>Priority creditor's name and mailing address</b>  GARCIA VAZQUEZ, FATIMA M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.305.	<b>Priority creditor's name and mailing address</b>  GARCIA ZETINO, PAULINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.306.	<b>Priority creditor's name and mailing address</b>  GARCIA, BRANDON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.307.	<b>Priority creditor's name and mailing address</b>  GARCIA, CATHERIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.308.	<b>Priority creditor's name and mailing address</b>  GARCIA, JENNIFER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.309.	<b>Priority creditor's name and mailing address</b>  GARCILITA MARTINEZ, MARIA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.310.	<b>Priority creditor's name and mailing address</b>  GARCILITA MARTINEZ, SERGIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.311.	<b>Priority creditor's name and mailing address</b>  GARZA DZIB, JOSE J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.312.	<b>Priority creditor's name and mailing address</b>  GARZA, CRYSTAL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.313.	<b>Priority creditor's name and mailing address</b>  GARZA, JUSTIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.314.	<b>Priority creditor's name and mailing address</b>  GASCA MARTINEZ, PEDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.315.	<b>Priority creditor's name and mailing address</b>  GEBREMARIAM, AYNETA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.316.	<b>Priority creditor's name and mailing address</b>  GEBREYESUS, ABADI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.317.	<b>Priority creditor's name and mailing address</b>  GENDREAU, ERIC Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.318.	<b>Priority creditor's name and mailing address</b>  GEORGE, JEREMY Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.319.	<b>Priority creditor's name and mailing address</b>  GERREN, LIAM Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.320.	<b>Priority creditor's name and mailing address</b>  GIL, AXLEJAMDRA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.321.	<b>Priority creditor's name and mailing address</b>  GLATZ, JAMIE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.322.	<b>Priority creditor's name and mailing address</b>  GOCHOCO, FORTDAD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.323.	<b>Priority creditor's name and mailing address</b>  GODINEZ, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.324.	<b>Priority creditor's name and mailing address</b>  GOMEZ GONZALEZ, MILVIA B. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.325.	<b>Priority creditor's name and mailing address</b>  GOMEZ TORRES, KEVIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.326.	<b>Priority creditor's name and mailing address</b>  GOMEZ VAZQUEZ, SERGIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.327.	<b>Priority creditor's name and mailing address</b>  GOMEZ, SANDRA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.328.	<b>Priority creditor's name and mailing address</b>  GONZALES, CONNIE Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.329.	<b>Priority creditor's name and mailing address</b>  GONZALES, DALTON Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.330.	<b>Priority creditor's name and mailing address</b>  GONZALES, ERIKA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.331.	<b>Priority creditor's name and mailing address</b>  GONZALEZ CASTELANO, JOSE C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.332.	<b>Priority creditor's name and mailing address</b>  GONZALEZ CRUZ, EDUARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.333.	<b>Priority creditor's name and mailing address</b>  GONZALEZ ESPINOZA, ISRAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.334.	<b>Priority creditor's name and mailing address</b>  GONZALEZ FLORES, LETICIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.335.	<b>Priority creditor's name and mailing address</b>  GONZALEZ LOPEZ, JOSE J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.336.	<b>Priority creditor's name and mailing address</b>  GONZALEZ MALDONADO, ELIANIB Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.337.	<b>Priority creditor's name and mailing address</b>  GONZALEZ MORALES, LUDWIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.338.	<b>Priority creditor's name and mailing address</b>  GONZALEZ MORENO, XOCHITL I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.339.	<b>Priority creditor's name and mailing address</b>  GONZALEZ RODRIGUEZ, MA ESTHELA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.340.	<b>Priority creditor's name and mailing address</b>  GONZALEZ TORRES, JONATHAN EMMANUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.341.	<b>Priority creditor's name and mailing address</b>  GONZALEZ TOVAR, ESPERANZA S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									

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2.342.	<b>Priority creditor's name and mailing address</b>  GONZALEZ, JAMIE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.343.	<b>Priority creditor's name and mailing address</b>  GOZUM, BREN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.344.	<b>Priority creditor's name and mailing address</b>  GRABOW, NEIL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.345.	<b>Priority creditor's name and mailing address</b>  GRACIDA ESPINOZA, CARMEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.346.	<b>Priority creditor's name and mailing address</b>  GRANADOS GARCIA, ROSA I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.347.	<b>Priority creditor's name and mailing address</b>  GRANJENO DEL AGUILA, LUIS E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.348.	<b>Priority creditor's name and mailing address</b>  GRANUM, SIDNEY J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.349.	<b>Priority creditor's name and mailing address</b>  GREEN, LANNY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.350.	<b>Priority creditor's name and mailing address</b>  GRIEGO, JONATHAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.351.	<b>Priority creditor's name and mailing address</b>  GROVE, BRANDI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.352.	<b>Priority creditor's name and mailing address</b>  GRUNEWALD, KATHY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.353.	<b>Priority creditor's name and mailing address</b>  GUERRA FERNANDEZ, EDUARDO J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.354.	<b>Priority creditor's name and mailing address</b>  GUERRA FERNANDEZ, JUAN D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.355.	<b>Priority creditor's name and mailing address</b>  GUERRERO BRITO, PEDRO L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
UNDETERMINED										
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2.356.	<b>Priority creditor's name and mailing address</b>  GUEVARA, STEPHANIE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.357.	<b>Priority creditor's name and mailing address</b>  GUIJON ARREOLA, ANGELES J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.358.	<b>Priority creditor's name and mailing address</b>  GUIJON ARREOLA, JOSE D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.359.	<b>Priority creditor's name and mailing address</b>  GUILAVOGUI, ERICK F. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.360.	<b>Priority creditor's name and mailing address</b>  GUILLEN DE RODRIGUEZ, MONICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.361.	<b>Priority creditor's name and mailing address</b>  GUNJI, KOHTA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.362.	<b>Priority creditor's name and mailing address</b>  GUTIERREZ, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.363.	<b>Priority creditor's name and mailing address</b>  GUZMAN TIRADO, JOSE C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.364.	<b>Priority creditor's name and mailing address</b>  GUZMAN VILLEGAS, LILIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.365.	<b>Priority creditor's name and mailing address</b>  HAMILTON, SHRESEA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.366.	<b>Priority creditor's name and mailing address</b>  HENRY, DYLAN Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.367.	<b>Priority creditor's name and mailing address</b>  HERNANDES, LESLIE Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.368.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ AVILA, MARIA T. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.369.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ CABALLERO, JOSE I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.370.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ CABALLERO, JUAN A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.371.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ CHAVEZ, JONATHAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.372.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ FIGUEROA, KATIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.373.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ GUTIERREZ, ALBERTO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.374.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ HERNANDEZ, MIRIAM Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.375.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ HUERTA, JONATHAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.376.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ JR, EDUARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.377.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ LULE, DANIEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.378.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ LULE, JORGE L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.379.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ MEJIA, VICTOR D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.380.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ RAMOS, JOSE A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.381.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ ROBLEDO, VALERIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.382.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ ROCHA, SARA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.383.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ SANCHEZ, CESAR A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.384.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ ULLOA, EDGAR D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.385.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ VAZQUEZ, HUMBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.386.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ VEGA, MABEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.387.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, ALMA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.388.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, ANDREA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.389.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, CHRIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.390.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, EFREN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.391.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, GEORGE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.392.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, JESUS J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.393.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, JOSE Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.394.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, KARLA M. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.395.	<b>Priority creditor's name and mailing address</b>  HERNANDEZ, LUDIVINA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.396.	<b>Priority creditor's name and mailing address</b>  HERRERA DE CASTILLO, SONIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.397.	<b>Priority creditor's name and mailing address</b>  HERRERA, ROSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.398.	<b>Priority creditor's name and mailing address</b>  HESER, HUNTER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.399.	<b>Priority creditor's name and mailing address</b>  HILL, KARLEE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.400.	<b>Priority creditor's name and mailing address</b>  HTOO, POE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.401.	<b>Priority creditor's name and mailing address</b>  HURTADO RUIZ, ANGELICA M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.402.	<b>Priority creditor's name and mailing address</b>  HURTADO RUIZ, MARIA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.403.	<b>Priority creditor's name and mailing address</b>  HURTADO RUIZ, MIGUEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.404.	<b>Priority creditor's name and mailing address</b>  HUSABOE, DAPHNE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.405.	<b>Priority creditor's name and mailing address</b>  IBARRA DELGADO, RICARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.406.	<b>Priority creditor's name and mailing address</b>  IBARRA LULE, AMELIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.407.	<b>Priority creditor's name and mailing address</b>  IBARRA TORRES, SAMUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.408.	<b>Priority creditor's name and mailing address</b>  IGNALIG, GERTROD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.409.	<b>Priority creditor's name and mailing address</b>  JACINTO MORALES, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.410.	<b>Priority creditor's name and mailing address</b>  JAIME ANDRADE, MARIA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.411.	<b>Priority creditor's name and mailing address</b>  JIMENEZ FLORES, VICTOR M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.412.	<b>Priority creditor's name and mailing address</b>  JIMENEZ GUTIERREZ, BLANCA V. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.413.	<b>Priority creditor's name and mailing address</b>  JIMENEZ HERNANDEZ, HECTOR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.414.	<b>Priority creditor's name and mailing address</b>  JIMENEZ NUNEZ, MARIO C. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.415.	<b>Priority creditor's name and mailing address</b>  JIMENEZ OROZCO, EMILY R. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.416.	<b>Priority creditor's name and mailing address</b>  JIMENEZ ORTEGA, JENIFFER M. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.417.	<b>Priority creditor's name and mailing address</b>  JIMENEZ RAMIREZ, JUAN ALBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.418.	<b>Priority creditor's name and mailing address</b>  JIMENEZ, CESAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.419.	<b>Priority creditor's name and mailing address</b>  JIMENEZ, DORA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										

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2.420.	<b>Priority creditor's name and mailing address</b>  JIMENEZ, JESSICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.421.	<b>Priority creditor's name and mailing address</b>  JOHNSON, MICHAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.422.	<b>Priority creditor's name and mailing address</b>  JUAREZ ADAME, MA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.423.	<b>Priority creditor's name and mailing address</b>  JUAREZ FLORES, JESUS F. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.424.	<b>Priority creditor's name and mailing address</b>  JUAREZ MEJIA, ANIBAL Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.425.	<b>Priority creditor's name and mailing address</b>  JUAREZ, ARMANDO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.426.	<b>Priority creditor's name and mailing address</b>  JUAREZ, CRYSTAL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.427.	<b>Priority creditor's name and mailing address</b>  JUNTILLA, JONNAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.428.	<b>Priority creditor's name and mailing address</b>  JURADO AQUINO, DIEGO I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.429.	<b>Priority creditor's name and mailing address</b>  JURGENS, BRADY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.430.	<b>Priority creditor's name and mailing address</b>  KATOSANG, KAYLA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.431.	<b>Priority creditor's name and mailing address</b>  KEBEKOL, ALLEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									

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2.432.	<b>Priority creditor's name and mailing address</b>  KESTER, MICHAEL B. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.433.	<b>Priority creditor's name and mailing address</b>  KHONOPCHANU, LARYSA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.434.	<b>Priority creditor's name and mailing address</b>  KLEVE, ERIC Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.435.	<b>Priority creditor's name and mailing address</b>  KNICKREHM, STEPHEN C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.436.	<b>Priority creditor's name and mailing address</b>  KRUMBACH, JORDEN L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.437.	<b>Priority creditor's name and mailing address</b>  KUE, MUE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.438.	<b>Priority creditor's name and mailing address</b>  KUOL, PETER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.439.	<b>Priority creditor's name and mailing address</b>  KYLE LOGAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.440.	<b>Priority creditor's name and mailing address</b>  LABIS, KELVIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.441.	<b>Priority creditor's name and mailing address</b>  LABRA, VINCENT J. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.442.	<b>Priority creditor's name and mailing address</b>  LACUESTA, ALLEA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.443.	<b>Priority creditor's name and mailing address</b>  LAGGI, KUNDI Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.444.	<b>Priority creditor's name and mailing address</b>  LAGOS, GRACE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.445.	<b>Priority creditor's name and mailing address</b>  LAGUNAS CANTERO, LUCILA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.446.	<b>Priority creditor's name and mailing address</b>  LAH DEW, SAWSTEPHEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.447.	<b>Priority creditor's name and mailing address</b>  LAO QUINONES, JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.448.	<b>Priority creditor's name and mailing address</b>  LARA CALDERON, SILVIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.449.	<b>Priority creditor's name and mailing address</b>  LARA SILVA, JOSE SALUD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.450.	<b>Priority creditor's name and mailing address</b>  LARROCA, MICHAEL Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.451.	<b>Priority creditor's name and mailing address</b>  LAZARO, JAYPEE Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.452.	<b>Priority creditor's name and mailing address</b>  LEAL, ALYSSA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.453.	<b>Priority creditor's name and mailing address</b>  LEBRON CERDA, MAURICIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.454.	<b>Priority creditor's name and mailing address</b>  LEE, ALYSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.455.	<b>Priority creditor's name and mailing address</b>  LEGASPI, MARK JOSEPH C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.456.	<b>Priority creditor's name and mailing address</b>  LENSING, JESSICA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.457.	<b>Priority creditor's name and mailing address</b>  LEON MALDONADO, HUGO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.458.	<b>Priority creditor's name and mailing address</b>  LERION, AVELJUN Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.459.	<b>Priority creditor's name and mailing address</b>  LERMA JR, MIGUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.460.	<b>Priority creditor's name and mailing address</b>  LEZAMA LOPEZ, FELIPE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.461.	<b>Priority creditor's name and mailing address</b>  LINARES, JOSUE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.462.	<b>Priority creditor's name and mailing address</b>  LOE GARCIA, JUAN RAMON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.463.	<b>Priority creditor's name and mailing address</b>  LOHSE, DOUGLAS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.464.	<b>Priority creditor's name and mailing address</b>  LOKIAR, POCAHONTAS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.465.	<b>Priority creditor's name and mailing address</b>  LOPEZ ADORNO, EMANUEL Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED
	<b>Date or dates debt was incurred</b>  VARIOUS	<b>Basis for the claim:</b>  ACCRUED WAGES & PTO		<b>Nonpriority amount</b> UNDETERMINED
	<b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.466.	<b>Priority creditor's name and mailing address</b>  LOPEZ BAUTISTA, LEONARDO Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED
	<b>Date or dates debt was incurred</b>  VARIOUS	<b>Basis for the claim:</b>  ACCRUED WAGES & PTO		<b>Nonpriority amount</b> UNDETERMINED
	<b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.467.	<b>Priority creditor's name and mailing address</b>  LOPEZ CASAS, ANDREA G. Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED
	<b>Date or dates debt was incurred</b>  VARIOUS	<b>Basis for the claim:</b>  ACCRUED WAGES & PTO		<b>Nonpriority amount</b> UNDETERMINED
	<b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.468.	<b>Priority creditor's name and mailing address</b>  LOPEZ CASTRO, CESAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.469.	<b>Priority creditor's name and mailing address</b>  LOPEZ GARCIA, ANDRES Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.470.	<b>Priority creditor's name and mailing address</b>  LOPEZ GARCIA, VICTOR H. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.471.	<b>Priority creditor's name and mailing address</b>  LOPEZ GOMEZ, BRENDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.472.	<b>Priority creditor's name and mailing address</b>  LOPEZ JR, HERBERT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.473.	<b>Priority creditor's name and mailing address</b>  LOPEZ LOPEZ, JOSE L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.474.	<b>Priority creditor's name and mailing address</b>  LOPEZ MIRANDA, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.475.	<b>Priority creditor's name and mailing address</b>  LOPEZ MORENO, CLAUDIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.476.	<b>Priority creditor's name and mailing address</b>  LOPEZ OROZCO, MAYNOR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.477.	<b>Priority creditor's name and mailing address</b>  LOPEZ RAMOS, BERSAIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.478.	<b>Priority creditor's name and mailing address</b>  LOPEZ RAMOS, JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.479.	<b>Priority creditor's name and mailing address</b>  LOPEZ RIVERA, MARIA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
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Nonpriority amount										
UNDETERMINED										

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2.480.	<b>Priority creditor's name and mailing address</b>  LOPEZ RODRIGUEZ, JUAN C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.481.	<b>Priority creditor's name and mailing address</b>  LOPEZ RODRIGUEZ, OMAR J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.482.	<b>Priority creditor's name and mailing address</b>  LOPEZ, ASHLEY M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.483.	<b>Priority creditor's name and mailing address</b>  LOPEZ, BRYAN Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.484.	<b>Priority creditor's name and mailing address</b>  LOPEZ, MISAEAL Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.485.	<b>Priority creditor's name and mailing address</b>  LOPEZ, NICEFORO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.486.	<b>Priority creditor's name and mailing address</b>  LOPEZ, SELENA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.487.	<b>Priority creditor's name and mailing address</b>  LORA SANCHEZ, ERNESTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.488.	<b>Priority creditor's name and mailing address</b>  LOUANGSAPHA KDY, BOUALAPHA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.489.	<b>Priority creditor's name and mailing address</b>  LOZANO LOPEZ, YOLANDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.490.	<b>Priority creditor's name and mailing address</b>  LOZANO, BENJEMIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.491.	<b>Priority creditor's name and mailing address</b>  LOZANO, YNTI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.492.	<b>Priority creditor's name and mailing address</b>  LUCAS JR, STEVEN Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.493.	<b>Priority creditor's name and mailing address</b>  LUCIO, MELISSA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.494.	<b>Priority creditor's name and mailing address</b>  LULE AMEZQUITA, LUIS G. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.495.	<b>Priority creditor's name and mailing address</b>  LULE CAMARGO, IGNACIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.496.	<b>Priority creditor's name and mailing address</b>  LULE CHAVEZ, SAMUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.497.	<b>Priority creditor's name and mailing address</b>  LULE GARCIA, JOSE DE JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.498.	<b>Priority creditor's name and mailing address</b>  LULE GONZALEZ, LUIS ANTONIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.499.	<b>Priority creditor's name and mailing address</b>  LULE MUNIZ, CARLOS FRANCISCO F. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.500.	<b>Priority creditor's name and mailing address</b>  LULE SERRANO, MARIA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.501.	<b>Priority creditor's name and mailing address</b>  LULE SERRATO, LUIS A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.502.	<b>Priority creditor's name and mailing address</b>  LUNA JIMENEZ, JESUS A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.503.	<b>Priority creditor's name and mailing address</b>  LUNA RODRIGUEZ, DAVID A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Nonpriority amount										
UNDETERMINED										

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2.504.	<b>Priority creditor's name and mailing address</b>  LUNA, ALBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.505.	<b>Priority creditor's name and mailing address</b>  MACIAS CASTANEDA, HERMELINDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.506.	<b>Priority creditor's name and mailing address</b>  MACIN MENDOZA, ANA MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.507.	<b>Priority creditor's name and mailing address</b>  MADRID HERNANDEZ, LUIS C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.508.	<b>Priority creditor's name and mailing address</b>  MADRID, VERONICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.509.	<b>Priority creditor's name and mailing address</b>  MAHARAJ, DANVIR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.510.	<b>Priority creditor's name and mailing address</b>  MAHARAJ, SUDHA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.511.	<b>Priority creditor's name and mailing address</b>  MALDONADO ESTRADA, DAMIAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.512.	<b>Priority creditor's name and mailing address</b>  MALDONADO GALLARDO, ELISA VET Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.513.	<b>Priority creditor's name and mailing address</b>  MALDONADO VARGAS, MIGUEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.514.	<b>Priority creditor's name and mailing address</b>  MALDONADO, CYNTHIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.515.	<b>Priority creditor's name and mailing address</b>  MALDONADO, JAVIER D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.516.	<b>Priority creditor's name and mailing address</b>  MALENA, STONEY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.517.	<b>Priority creditor's name and mailing address</b>  MANCERA RODRIGUEZ, FERNANDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.518.	<b>Priority creditor's name and mailing address</b>  MANDUJANO GALLARDO, LUIS A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.519.	<b>Priority creditor's name and mailing address</b>  MARAS, CHERI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.520.	<b>Priority creditor's name and mailing address</b>  MARMOLEJO RODRIGUEZ, PABLO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.521.	<b>Priority creditor's name and mailing address</b>  MARRERO GOMEZ, GISELL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.522.	<b>Priority creditor's name and mailing address</b>  MARTINEZ ALVAREZ, SALVADOR N. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.523.	<b>Priority creditor's name and mailing address</b>  MARTINEZ BURGOS, RICHARD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.524.	<b>Priority creditor's name and mailing address</b>  MARTINEZ DOMINGUEZ, HUGO EMMANUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.525.	<b>Priority creditor's name and mailing address</b>  MARTINEZ GARCIA, JOSE G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.526.	<b>Priority creditor's name and mailing address</b>  MARTINEZ GARCIA, LUIS DAVID Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.527.	<b>Priority creditor's name and mailing address</b>  MARTINEZ JR., FRANCISCO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.528.	<b>Priority creditor's name and mailing address</b>  MARTINEZ JR., ROBERT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.529.	<b>Priority creditor's name and mailing address</b>  MARTINEZ LOPEZ, GERARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.530.	<b>Priority creditor's name and mailing address</b>  MARTINEZ LOPEZ, JESUS E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.531.	<b>Priority creditor's name and mailing address</b>  MARTINEZ MACIAS, EDWIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.532.	<b>Priority creditor's name and mailing address</b>  MARTINEZ NAVA, PILAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.533.	<b>Priority creditor's name and mailing address</b>  MARTINEZ PANIAGUA, MARIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.534.	<b>Priority creditor's name and mailing address</b>  MARTINEZ PAREDES, MANUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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2.535.	<b>Priority creditor's name and mailing address</b>  MARTINEZ PATINO, ALMA R. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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2.536.	<b>Priority creditor's name and mailing address</b>  MARTINEZ PEREZ, ISRAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.537.	<b>Priority creditor's name and mailing address</b>  MARTINEZ RAMOS, FERNANDO D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.538.	<b>Priority creditor's name and mailing address</b>  MARTINEZ RAMOS, MONTSERRAT GUADALUPE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.539.	<b>Priority creditor's name and mailing address</b>  MARTINEZ RETENIA, ROGELIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.540.	<b>Priority creditor's name and mailing address</b>  MARTINEZ RODRIGUEZ, JOSE F. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.541.	<b>Priority creditor's name and mailing address</b>  MARTINEZ RUIZ, LORENA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.542.	<b>Priority creditor's name and mailing address</b>  MARTINEZ SAMANO, PALOMO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.543.	<b>Priority creditor's name and mailing address</b>  MARTINEZ SERRANO, MARIANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.544.	<b>Priority creditor's name and mailing address</b>  MARTINEZ VALENTIN, RAMON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.545.	<b>Priority creditor's name and mailing address</b>  MARTINEZ, ALEX Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.546.	<b>Priority creditor's name and mailing address</b>  MARTINEZ, AMANDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.547.	<b>Priority creditor's name and mailing address</b>  MARTINEZ, ELOY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.548.	<b>Priority creditor's name and mailing address</b>  MATA ESQUEDA, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.549.	<b>Priority creditor's name and mailing address</b>  MATOS CASTILLO, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.550.	<b>Priority creditor's name and mailing address</b>  MATURINO MARTINEZ, JESUS EDUARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.551.	<b>Priority creditor's name and mailing address</b>  MAU, TYLER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.552.	<b>Priority creditor's name and mailing address</b>  MAUNG, MYINT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.553.	<b>Priority creditor's name and mailing address</b>  MAUNG, WIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.554.	<b>Priority creditor's name and mailing address</b>  MAYORGA-RETA, CRISTOBAL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.555.	<b>Priority creditor's name and mailing address</b>  MCGUIRE, DARIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.556.	<b>Priority creditor's name and mailing address</b>  MCPHERSON, LORNA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.557.	<b>Priority creditor's name and mailing address</b>  MEDINA MALDONADO, CRISTIAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.558.	<b>Priority creditor's name and mailing address</b>  MEDINA MALDONADO, EMANUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.559.	<b>Priority creditor's name and mailing address</b>  MEDINA MALDONADO, EZEQUIEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.560.	<b>Priority creditor's name and mailing address</b>  MEDINA MALDONADO, MARCO ARTURO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.561.	<b>Priority creditor's name and mailing address</b>  MEDINA MEDINA, ANA BERTA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.562.	<b>Priority creditor's name and mailing address</b>  MEJA, TAGEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.563.	<b>Priority creditor's name and mailing address</b>  MEJIA AVILA, JORGE LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.564.	<b>Priority creditor's name and mailing address</b>  MEJIA MEDINA, JULIO C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.565.	<b>Priority creditor's name and mailing address</b>  MELENDEZ CABALLERO, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.566.	<b>Priority creditor's name and mailing address</b>  MELENDEZ FLORES, CRISTINO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.567.	<b>Priority creditor's name and mailing address</b>  MELENDEZ MALDONADO, JOSHNIEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.568.	<b>Priority creditor's name and mailing address</b>  MELON, DIO V. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.569.	<b>Priority creditor's name and mailing address</b>  MENDEZ VAZQUEZ, YESSICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.570.	<b>Priority creditor's name and mailing address</b>  MENDOZA, YOEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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2.571.	<b>Priority creditor's name and mailing address</b>  MERCADO RUIZ, MARIA T. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.572.	<b>Priority creditor's name and mailing address</b>  MEREP, LYNN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.573.	<b>Priority creditor's name and mailing address</b>  MEYERAAN, NICOLE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.574.	<b>Priority creditor's name and mailing address</b>  MILLER, MAISON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.575.	<b>Priority creditor's name and mailing address</b>  MINNESOTA DEPARTMENT OF REVENUE 600 ROBERTS ST N ST PAUL MN 55101  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (8)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  TAXES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.576.	<b>Priority creditor's name and mailing address</b>  MIRABALLES, ROLAND Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.577.	<b>Priority creditor's name and mailing address</b>  MIRANDA AGUSTIN, RUDY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.578.	<b>Priority creditor's name and mailing address</b>  MIRANDA ARIAS, FATIMA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.579.	<b>Priority creditor's name and mailing address</b>  MIRANDA MARTINEZ, JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.580.	<b>Priority creditor's name and mailing address</b>  MIRANDA TIERRABLANCA, FERNANDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.581.	<b>Priority creditor's name and mailing address</b>  MOCTAZUMA, MICHELLE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.582.	<b>Priority creditor's name and mailing address</b>  MOGERE, JOHN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.583.	<b>Priority creditor's name and mailing address</b>  MOHR, JOSEPH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.584.	<b>Priority creditor's name and mailing address</b>  MOLINA CASAS, PEDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.585.	<b>Priority creditor's name and mailing address</b>  MOLINA ESCAMILLA, SANDRA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.586.	<b>Priority creditor's name and mailing address</b>  MOLINA LOPEZ, JUANA KARINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.587.	<b>Priority creditor's name and mailing address</b>  MONROY LOPEZ, LUIS ENRIQUE E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.588.	<b>Priority creditor's name and mailing address</b>  MONTANO CARRANZA, MORELIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.589.	<b>Priority creditor's name and mailing address</b>  MONTANO MARMOLEJO, MAURICIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.590.	<b>Priority creditor's name and mailing address</b>  MONTANO MORENO, LUIS E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.591.	<b>Priority creditor's name and mailing address</b>  MONTELLANO, SAMUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.592.	<b>Priority creditor's name and mailing address</b>  MONTERDE, RAFAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.593.	<b>Priority creditor's name and mailing address</b>  MONTIEL, GILBERT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.594.	<b>Priority creditor's name and mailing address</b>  MONTOYA MARTINEZ, JUAN DIEGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.595.	<b>Priority creditor's name and mailing address</b>  MOON, SER N. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.596.	<b>Priority creditor's name and mailing address</b>  MORALES GARCIA, LEONARDO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.597.	<b>Priority creditor's name and mailing address</b>  MORALES MARTIN, BLANCA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.598.	<b>Priority creditor's name and mailing address</b>  MORALES MARTINEZ, MARIA F. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.599.	<b>Priority creditor's name and mailing address</b>  MORALES OLGUIN, GERARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.600.	<b>Priority creditor's name and mailing address</b>  MORALES ORTIZ, ABIGAIL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.601.	<b>Priority creditor's name and mailing address</b>  MORALES SERRATO, ESTEFANIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.602.	<b>Priority creditor's name and mailing address</b>  MORALES, JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.603.	<b>Priority creditor's name and mailing address</b>  MORENO CRUZ, EMMANUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.604.	<b>Priority creditor's name and mailing address</b>  MORENO GONZALEZ, BLANCA E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.605.	<b>Priority creditor's name and mailing address</b>  MORENO, MARTIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.606.	<b>Priority creditor's name and mailing address</b>  MORTEJO, EL ANDREW SOFIO III Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.607.	<b>Priority creditor's name and mailing address</b>  MOSTIERA, LEVIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.608.	<b>Priority creditor's name and mailing address</b>  MUNGUIA VIDAL, DIEGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.609.	<b>Priority creditor's name and mailing address</b>  MUNGUIA VIDAL, FRANCISCO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.610.	<b>Priority creditor's name and mailing address</b>  MUNGUIA, BRIANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.611.	<b>Priority creditor's name and mailing address</b>  MUNIZ MARTINEZ, JUANITA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.612.	<b>Priority creditor's name and mailing address</b>  MUNOZ CANALES, JERSSON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.613.	<b>Priority creditor's name and mailing address</b>  MURILLO ESCAMILLA, JAIRO S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.614.	<b>Priority creditor's name and mailing address</b>  MURILLO MANRIQUEZ, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.615.	<b>Priority creditor's name and mailing address</b>  MURILLO QUIROGA, ALBA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.616.	<b>Priority creditor's name and mailing address</b>  MURILLO, JAIME Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.617.	<b>Priority creditor's name and mailing address</b>  MURILLO, SALVADOR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.618.	<b>Priority creditor's name and mailing address</b>  NACE, DONALD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.619.	<b>Priority creditor's name and mailing address</b>  NAJERA RUIZ, STACY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.620.	<b>Priority creditor's name and mailing address</b>  NAUMANN, KAYLEE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.621.	<b>Priority creditor's name and mailing address</b>  NAVA MOSQUEDA, PABLO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.622.	<b>Priority creditor's name and mailing address</b>  NAXAY, DUANGCHANH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.623.	<b>Priority creditor's name and mailing address</b>  NEGRON RIVERA, OMAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.624.	<b>Priority creditor's name and mailing address</b>  NEIRA, KEVIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.625.	<b>Priority creditor's name and mailing address</b>  NELSON, KELLY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.626.	<b>Priority creditor's name and mailing address</b>  NELSON, RICHARD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.627.	<b>Priority creditor's name and mailing address</b>  NEWTON, ZACHARY Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.628.	<b>Priority creditor's name and mailing address</b>  NGIRDENGOLL, ESTHER Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.629.	<b>Priority creditor's name and mailing address</b>  NGIRKELAU, TIARA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.630.	<b>Priority creditor's name and mailing address</b>  NGORIAKL, DIRRECHONG Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.631.	<b>Priority creditor's name and mailing address</b>  NIELSEN, MARK Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.632.	<b>Priority creditor's name and mailing address</b>  NIETO MARTINEZ, GLORIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.633.	<b>Priority creditor's name and mailing address</b>  NOHRENBURG, TRAVIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Nonpriority amount	UNDETERMINED
Total claim	Priority amount									
UNDETERMINED	UNDETERMINED									
Nonpriority amount										
UNDETERMINED										
2.634.	<b>Priority creditor's name and mailing address</b>  NOLASCO SANTANA, ESMIRNA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Nonpriority amount	UNDETERMINED
Total claim	Priority amount									
UNDETERMINED	UNDETERMINED									
Nonpriority amount										
UNDETERMINED										
2.635.	<b>Priority creditor's name and mailing address</b>  NOLTE, SUELIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Nonpriority amount	UNDETERMINED
Total claim	Priority amount									
UNDETERMINED	UNDETERMINED									
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.636.	<b>Priority creditor's name and mailing address</b>  NUE, MAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.637.	<b>Priority creditor's name and mailing address</b>  NUNEZ ARELLANO, MARTIN J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.638.	<b>Priority creditor's name and mailing address</b>  NUNEZ MALDONADO, JESUS D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.639.	<b>Priority creditor's name and mailing address</b>  NUNEZ, JOANNA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.640.	<b>Priority creditor's name and mailing address</b>  NUNTHAVONG, DEANNA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.641.	<b>Priority creditor's name and mailing address</b>  NYANAMBA, RICHARD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.642.	<b>Priority creditor's name and mailing address</b>  OBIDO, TITUS JAMES Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.643.	<b>Priority creditor's name and mailing address</b>  OCEGUEDA VARGAS, LUZ A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.644.	<b>Priority creditor's name and mailing address</b>  OCHOA SIERRA, MARIA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.645.	<b>Priority creditor's name and mailing address</b>  OLIVO, JULIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.646.	<b>Priority creditor's name and mailing address</b>  ORNELAS GUTIERREZ, EDUARDO ALEJANDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.647.	<b>Priority creditor's name and mailing address</b>  OROZCO MORALES, MARIA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.648.	<b>Priority creditor's name and mailing address</b>  ORTEGA JAVIER, HILDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.649.	<b>Priority creditor's name and mailing address</b>  ORTEGA VAZQUEZ, JUAN J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.650.	<b>Priority creditor's name and mailing address</b>  ORTEGA ZAVALA, LEODEGARIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.651.	<b>Priority creditor's name and mailing address</b>  ORTEGA, RAFAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.652.	<b>Priority creditor's name and mailing address</b>  ORTIZ ALVAREZ, FERNANDO I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.653.	<b>Priority creditor's name and mailing address</b>  ORTIZ DELIZ, HECTOR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.654.	<b>Priority creditor's name and mailing address</b>  ORTIZ LOPEZ, JAVIER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.655.	<b>Priority creditor's name and mailing address</b>  ORTIZ LOPEZ, JUAN G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.656.	<b>Priority creditor's name and mailing address</b>  ORTIZ LOPEZ, SONIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.657.	<b>Priority creditor's name and mailing address</b>  ORTIZ MARTINEZ, CESAR A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.658.	<b>Priority creditor's name and mailing address</b>  ORTIZ MARTINEZ, JOSE D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.659.	<b>Priority creditor's name and mailing address</b>  ORTIZ MEDINA, BRYAN G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.660.	<b>Priority creditor's name and mailing address</b>  ORTIZ MEJIA, SHENY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #d3d3d3; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.661.	<b>Priority creditor's name and mailing address</b>  ORTIZ MORENO, ALEJANDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #d3d3d3; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.662.	<b>Priority creditor's name and mailing address</b>  ORTIZ MUNOZ, JOSE M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #d3d3d3; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.663.	<b>Priority creditor's name and mailing address</b>  ORTIZ, SUSAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.664.	<b>Priority creditor's name and mailing address</b>  OUELLETTE, DOUGLAS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.665.	<b>Priority creditor's name and mailing address</b>  PACHECO, SALINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.666.	<b>Priority creditor's name and mailing address</b>  PADEN, JON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.667.	<b>Priority creditor's name and mailing address</b>  PADILLA CACIQUE, YESENIA E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.668.	<b>Priority creditor's name and mailing address</b>  PADRON, JONATHAN J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.669.	<b>Priority creditor's name and mailing address</b>  PALACIOS GARCIA, JOSE L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.670.	<b>Priority creditor's name and mailing address</b>  PALMA, RALPH JOESPH S. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.671.	<b>Priority creditor's name and mailing address</b>  PALOMO, ALEJANDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.672.	<b>Priority creditor's name and mailing address</b>  PAMINTUAN, MARSH RAYMOND Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.673.	<b>Priority creditor's name and mailing address</b>  PANIAGUA PANIAGUA, JOSE A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.674.	<b>Priority creditor's name and mailing address</b>  PANIAGUA YERENA, JUAN A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.675.	<b>Priority creditor's name and mailing address</b>  PANTOJA LOPEZ, DIANA E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.676.	<b>Priority creditor's name and mailing address</b>  PAREDES RENTERIA, JUANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.677.	<b>Priority creditor's name and mailing address</b>  PARGA VIRAMONTES, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										

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2.678.	<b>Priority creditor's name and mailing address</b>  PARGA VIRAMONTES, SERGIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.679.	<b>Priority creditor's name and mailing address</b>  PARRENO, WILFREDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.680.	<b>Priority creditor's name and mailing address</b>  PATADON, BENJIE O. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.681.	<b>Priority creditor's name and mailing address</b>  PATINO MEDINA, JOSE G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.682.	<b>Priority creditor's name and mailing address</b>  PAULSON, MATTHEW Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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2.683.	<b>Priority creditor's name and mailing address</b>  PENA LOPEZ, EDUARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.684.	<b>Priority creditor's name and mailing address</b>  PENARAN VEGA, IRASEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.685.	<b>Priority creditor's name and mailing address</b>  PENGLA, ROMEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.686.	<b>Priority creditor's name and mailing address</b>  PERALES, DAMIEN R. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.687.	<b>Priority creditor's name and mailing address</b>  PERALTA GARCIA, DANIEL PAULINO P. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.688.	<b>Priority creditor's name and mailing address</b>  PERALTA, ANGELES Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.689.	<b>Priority creditor's name and mailing address</b>  PEREGRINO JAVIER, JHONY A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.690.	<b>Priority creditor's name and mailing address</b>  PEREZ BALTAZAR, AURA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.691.	<b>Priority creditor's name and mailing address</b>  PEREZ BARRON, MIGUEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.692.	<b>Priority creditor's name and mailing address</b>  PEREZ GARCIA, DINORA C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.693.	<b>Priority creditor's name and mailing address</b>  PEREZ GARCIA, MIGUEL Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.694.	<b>Priority creditor's name and mailing address</b>  PEREZ PATINO, MAURICIO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.695.	<b>Priority creditor's name and mailing address</b>  PEREZ PEREZ, SORAYA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.696.	<b>Priority creditor's name and mailing address</b>  PEREZ RODRIGUEZ, ALEJANDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.697.	<b>Priority creditor's name and mailing address</b>  PEREZ VEGA, LEONARDO D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.698.	<b>Priority creditor's name and mailing address</b>  PEREZ, JAMES Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.699.	<b>Priority creditor's name and mailing address</b>  PEREZ, STARILEE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.700.	<b>Priority creditor's name and mailing address</b>  PICKARD, ALAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.701.	<b>Priority creditor's name and mailing address</b>  PINA RODRIGUEZ, HUGO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.702.	<b>Priority creditor's name and mailing address</b>  PINA RODRIGUEZ, JUAN P. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.703.	<b>Priority creditor's name and mailing address</b>  PINA SERVIN, ANA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.704.	<b>Priority creditor's name and mailing address</b>  PINA, JOSEY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.705.	<b>Priority creditor's name and mailing address</b>  PINON RUIZ, RAUL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.706.	<b>Priority creditor's name and mailing address</b>  PINTOR, MARK A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.707.	<b>Priority creditor's name and mailing address</b>  PIZANO PIZANO, JOSE A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.708.	<b>Priority creditor's name and mailing address</b>  PIZANO PIZANO, JOSE L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.709.	<b>Priority creditor's name and mailing address</b>  PIZANO PIZANO, ROGELIO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.710.	<b>Priority creditor's name and mailing address</b>  PLAZA IBARRA, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.711.	<b>Priority creditor's name and mailing address</b>  PLAZA RUIZ, FLAVIA B. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.712.	<b>Priority creditor's name and mailing address</b>  PLAZA SANCHEZ, RAUL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.713.	<b>Priority creditor's name and mailing address</b>  POMPA, RAMON I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.714.	<b>Priority creditor's name and mailing address</b>  PONCE SANCHEZ, BLANCA L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.715.	<b>Priority creditor's name and mailing address</b>  PONCE, MELISSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.716.	<b>Priority creditor's name and mailing address</b>  PORTES DE SOTUYO, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.717.	<b>Priority creditor's name and mailing address</b>  POSAS AYALA JR., REMIGIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.718.	<b>Priority creditor's name and mailing address</b>  POWELL, TODD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.719.	<b>Priority creditor's name and mailing address</b>  PRADO SOTO, JOSE M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.720.	<b>Priority creditor's name and mailing address</b>  PRATO, VINCENT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.721.	<b>Priority creditor's name and mailing address</b>  PRETZANTZIN OROZCO, ADA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.722.	<b>Priority creditor's name and mailing address</b>  PRETZANTZIN OROZCO, ODALIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.723.	<b>Priority creditor's name and mailing address</b>  QUINTANA FLORES, JOSE J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.724.	<b>Priority creditor's name and mailing address</b>  QUINTANA LOPEZ, JOSE R. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.725.	<b>Priority creditor's name and mailing address</b>  QUINTANA SILVA, JAVIER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.726.	<b>Priority creditor's name and mailing address</b>  QUINTANAR, GIOVANI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.727.	<b>Priority creditor's name and mailing address</b>  QUINTANAR, LUIS ANGEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.728.	<b>Priority creditor's name and mailing address</b>  QUIROZ, JOSIE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.729.	<b>Priority creditor's name and mailing address</b>  RABOR, JEFFERSON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.730.	<b>Priority creditor's name and mailing address</b>  RAMAN GANGADHARAN, SIVADOSS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.731.	<b>Priority creditor's name and mailing address</b>  RAMIREZ AGUILAR, CESAR Y. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.732.	<b>Priority creditor's name and mailing address</b>  RAMIREZ COVARRUBIAS, RAFAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.733.	<b>Priority creditor's name and mailing address</b>  RAMIREZ GARCIA, OSCAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.734.	<b>Priority creditor's name and mailing address</b>  RAMIREZ JR., ERMELO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.735.	<b>Priority creditor's name and mailing address</b>  RAMIREZ LOPEZ, OSCAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.736.	<b>Priority creditor's name and mailing address</b>  RAMIREZ PANIAGUA, BEATRIZ Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.737.	<b>Priority creditor's name and mailing address</b>  RAMIREZ RODRIGUEZ, JOSE M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.738.	<b>Priority creditor's name and mailing address</b>  RAMIREZ SEBASTIAN, WILLIAM Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.739.	<b>Priority creditor's name and mailing address</b>  RAMIREZ SERVIN, PEDRO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.740.	<b>Priority creditor's name and mailing address</b>  RAMIREZ VAZQUEZ, HUITZILOPOZTLI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.741.	<b>Priority creditor's name and mailing address</b>  RAMIREZ, EDMILIO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.742.	<b>Priority creditor's name and mailing address</b>  RAMIREZ, EMILY Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.743.	<b>Priority creditor's name and mailing address</b>  RAMIREZ, LORI A. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.744.	<b>Priority creditor's name and mailing address</b>  RAMOS CASIQUE, MARIA GUADALUPE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.745.	<b>Priority creditor's name and mailing address</b>  RAMOS GRANADOS, ADRIAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.746.	<b>Priority creditor's name and mailing address</b>  RAMOS IBARRA, JUAN C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.747.	<b>Priority creditor's name and mailing address</b>  RAMOS LOPEZ, OLGA I. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.748.	<b>Priority creditor's name and mailing address</b>  RAMOS MORALES, LEONARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.749.	<b>Priority creditor's name and mailing address</b>  RAMOS RIOS, GIANCARLO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.750.	<b>Priority creditor's name and mailing address</b>  RAMOS VAZQUEZ, LILIANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.751.	<b>Priority creditor's name and mailing address</b>  RAMOS, ANGEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.752.	<b>Priority creditor's name and mailing address</b>  RAMOS, ISAAC Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.753.	<b>Priority creditor's name and mailing address</b>  RAMOS, JOE Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.754.	<b>Priority creditor's name and mailing address</b>  RATCLIFF, DANIEL Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.755.	<b>Priority creditor's name and mailing address</b>  RATEMO, GRACE Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.756.	<b>Priority creditor's name and mailing address</b>  RAYA ACOSTA, LUIS ARMANDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.757.	<b>Priority creditor's name and mailing address</b>  RAYA CAMPOS, JESUS J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.758.	<b>Priority creditor's name and mailing address</b>  REHNELT, ALLEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.759.	<b>Priority creditor's name and mailing address</b>  REINAGA, JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.760.	<b>Priority creditor's name and mailing address</b>  REINHARDT, MICHELLE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.761.	<b>Priority creditor's name and mailing address</b>  RENQUIST, TAWANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.762.	<b>Priority creditor's name and mailing address</b>  REYES ALDAMA, PEDRO B. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.763.	<b>Priority creditor's name and mailing address</b>  REYES GARCIA, CHRYSTIAN A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.764.	<b>Priority creditor's name and mailing address</b>  REYES MORALES, AMILCAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.765.	<b>Priority creditor's name and mailing address</b>  REYES, NELSON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.766.	<b>Priority creditor's name and mailing address</b>  RIOS MARTINEZ, BLANCA L. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.767.	<b>Priority creditor's name and mailing address</b>  RIOS RAMIREZ, MARTIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.768.	<b>Priority creditor's name and mailing address</b>  RIOS, VERONICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.769.	<b>Priority creditor's name and mailing address</b>  RIQUIA PEREZ, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.770.	<b>Priority creditor's name and mailing address</b>  RIVERA ALVAREZ, CARLOS A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.771.	<b>Priority creditor's name and mailing address</b>  RIVERA BAEZ, EDWIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.772.	<b>Priority creditor's name and mailing address</b>  RIVERA COLON, ALFRED Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.773.	<b>Priority creditor's name and mailing address</b>  RIVERA CRUZ, ANTHONY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.774.	<b>Priority creditor's name and mailing address</b>  RIVERA HERNANDEZ, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.775.	<b>Priority creditor's name and mailing address</b>  RIVERA MELENDEZ, SHELLY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.776.	<b>Priority creditor's name and mailing address</b>  RIVERA RAMIREZ, BRANDON Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.777.	<b>Priority creditor's name and mailing address</b>  RIVERA, BRENDA ALEXIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.778.	<b>Priority creditor's name and mailing address</b>  RIVERA, GERALD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.779.	<b>Priority creditor's name and mailing address</b>  RIVERA, JOANNA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.780.	<b>Priority creditor's name and mailing address</b>  RIVERA, RUTH Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.781.	<b>Priority creditor's name and mailing address</b>  RIZO, ROSALINDA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.782.	<b>Priority creditor's name and mailing address</b>  ROBERTS, TIM Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.783.	<b>Priority creditor's name and mailing address</b>  ROBLES, RENE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.784.	<b>Priority creditor's name and mailing address</b>  ROCHA ZEPEDA, MARIA JOSEFINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.785.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ AVILA, ISRAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.786.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ BARRON, JAIME A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.787.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ CABALLERO, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.788.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ CORTES, DIANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.789.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ CORTES, LUCAS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.790.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ FUENTES, MIGUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.791.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ FUENTES, SONIA M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.792.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ GABRIOLA, MARIA F. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.793.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ GARCIA, HECTOR Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.794.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ HERNANDEZ, KAREN J. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.795.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ HERRERA, GUSTAVO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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Nonpriority amount										
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2.796.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ HERRERA, LUZ M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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2.797.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ JUAREZ, LESLY D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Nonpriority amount										
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2.798.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ MARQUEZ, JUAN J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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Nonpriority amount										
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2.799.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ MEDINA, DEBORAH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.800.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ MENDOZA, JORGE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.801.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ PICHARDO, MIGUEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
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2.802.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ RODRIGUEZ, FELIX Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Priority amount										
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2.803.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ ROMERO, ROSA E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.804.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ RUIZ, SARAI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f2f2f2; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.805.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ SANCHEZ, HEADI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f2f2f2; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.806.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ SANCHEZ, ISABEL A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f2f2f2; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.807.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ SANCHEZ, MA CARMEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.808.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ SANCHEZ, MARIA G. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.809.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ SANTIAGO, DOMINGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.810.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ SIERRA, JESUS M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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2.811.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ VILLANUEVA, LIZBETH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.812.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ VILLELA, ELMITA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.813.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ, ARLETT Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCRUED WAGES & PTO		<b>Nonpriority amount</b> UNDETERMINED
	<b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.814.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ, DESTINY A. Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCRUED WAGES & PTO		<b>Nonpriority amount</b> UNDETERMINED
	<b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

  

2.815.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ, KASSANDRA Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCRUED WAGES & PTO		<b>Nonpriority amount</b> UNDETERMINED
	<b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.816.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ, LORENZA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.817.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ, MARY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.818.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ, ROBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.819.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ, SOUKSAVANH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.820.	<b>Priority creditor's name and mailing address</b>  RODRIGUEZ, YARELI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.821.	<b>Priority creditor's name and mailing address</b>  ROJAS CISNEROS, JOSE ANTONIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.822.	<b>Priority creditor's name and mailing address</b>  ROJAS LOPEZ, IVAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.823.	<b>Priority creditor's name and mailing address</b>  ROJAS LOPEZ, MONICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.824.	<b>Priority creditor's name and mailing address</b>  ROJAS PIZANO, LUZ M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.825.	<b>Priority creditor's name and mailing address</b>  ROJAS RAMIREZ, DANIEL DE JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.826.	<b>Priority creditor's name and mailing address</b>  ROJAS ROJAS, HECTOR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.827.	<b>Priority creditor's name and mailing address</b>  ROJAS SANTIAGO, OSCAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.828.	<b>Priority creditor's name and mailing address</b>  ROJAS TREJO, CESAR EMMANUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.829.	<b>Priority creditor's name and mailing address</b>  ROJAS, MARINA E. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.830.	<b>Priority creditor's name and mailing address</b>  ROKICHY, TERLIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.831.	<b>Priority creditor's name and mailing address</b>  ROLDAN RIVERA, LUZ Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.832.	<b>Priority creditor's name and mailing address</b>  ROMERO, ANTHONY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.833.	<b>Priority creditor's name and mailing address</b>  ROMERO, ELSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.834.	<b>Priority creditor's name and mailing address</b>  ROSALES LOPEZ, MAYRA Y. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.835.	<b>Priority creditor's name and mailing address</b>  ROSARIO TORRES, ANGEL Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.836.	<b>Priority creditor's name and mailing address</b>  ROSARIO TORRES, CARLOS J. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.837.	<b>Priority creditor's name and mailing address</b>  ROSAS PEREZ, PATRICIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.838.	<b>Priority creditor's name and mailing address</b>  ROSAS RAMIREZ, OCTAVIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.839.	<b>Priority creditor's name and mailing address</b>  ROSILLO ARROYO, MONSERRAT Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.840.	<b>Priority creditor's name and mailing address</b>  ROSILLO GALICIA, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.841.	<b>Priority creditor's name and mailing address</b>  RUIZ PEREZ, MARIANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.842.	<b>Priority creditor's name and mailing address</b>  RUSE, TYLER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.843.	<b>Priority creditor's name and mailing address</b>  SALAS, JOHN M. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.844.	<b>Priority creditor's name and mailing address</b>  SALAZAR FABIAN, FERNANDO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.845.	<b>Priority creditor's name and mailing address</b>  SALINAS, MARIO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.846.	<b>Priority creditor's name and mailing address</b>  SALVADOR MORALES, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.847.	<b>Priority creditor's name and mailing address</b>  SAN JUAN CRUZ, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.848.	<b>Priority creditor's name and mailing address</b>  SAN MIGUEL, MAURO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.849.	<b>Priority creditor's name and mailing address</b>  SANCHEZ CARRILLO, ARACELI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.850.	<b>Priority creditor's name and mailing address</b>  SANCHEZ ELVIRA, DORCAS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.851.	<b>Priority creditor's name and mailing address</b>  SANCHEZ ELVIRA, RUTH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.852.	<b>Priority creditor's name and mailing address</b>  SANCHEZ LARA, ROGER J. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.853.	<b>Priority creditor's name and mailing address</b>  SANCHEZ MACIAS, KARLA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.854.	<b>Priority creditor's name and mailing address</b>  SANCHEZ, ALEJANDRO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.855.	<b>Priority creditor's name and mailing address</b>  SANCHEZ, CARLOS Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.856.	<b>Priority creditor's name and mailing address</b>  SANCHEZ, FRANCISCO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED
2.857.	<b>Priority creditor's name and mailing address</b>  SANCHEZ, GUSTAVO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED   <b>Nonpriority amount</b>  UNDETERMINED

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2.858.	<b>Priority creditor's name and mailing address</b>  SANCHEZ, JACKILYN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.859.	<b>Priority creditor's name and mailing address</b>  SANCHEZ, JESSICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.860.	<b>Priority creditor's name and mailing address</b>  SANDMEYER, MICHAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.861.	<b>Priority creditor's name and mailing address</b>  SANDOVAL, ISMAEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.862.	<b>Priority creditor's name and mailing address</b>  SANTIAGO ARROYO, NICOLE M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.863.	<b>Priority creditor's name and mailing address</b>  SANTIAGO ZAYAS, CALEB Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.864.	<b>Priority creditor's name and mailing address</b>  SANTOS FLORES, BRAYAN A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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Nonpriority amount										
UNDETERMINED										
2.865.	<b>Priority creditor's name and mailing address</b>  SANTOS GOMEZ, YANET Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.866.	<b>Priority creditor's name and mailing address</b>  SAVATDY, SITHA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.867.	<b>Priority creditor's name and mailing address</b>  SAY, PLAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.868.	<b>Priority creditor's name and mailing address</b>  SAYSON, ALYSSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.869.	<b>Priority creditor's name and mailing address</b>  SCHELLENBERG, CARTER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.870.	<b>Priority creditor's name and mailing address</b>  SCHOLTES, PAMELA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.871.	<b>Priority creditor's name and mailing address</b>  SEIGFREID, TOM Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.872.	<b>Priority creditor's name and mailing address</b>  SENGSOURICHANH, KHAMVANH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.873.	<b>Priority creditor's name and mailing address</b>  SERRATO CORNEJO, DIEGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.874.	<b>Priority creditor's name and mailing address</b>  SERRATO LULE, OSVALDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.875.	<b>Priority creditor's name and mailing address</b>  SEVILLA, NHYL ELMER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.876.	<b>Priority creditor's name and mailing address</b>  SHEE, PAW Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.877.	<b>Priority creditor's name and mailing address</b>  SIERRA PATINO, ALBERTO Z. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.878.	<b>Priority creditor's name and mailing address</b>  SIERRA PATINO, JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.879.	<b>Priority creditor's name and mailing address</b>  SLY, MORGAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.880.	<b>Priority creditor's name and mailing address</b>  SOLIZ CRUZ, ROLANDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.881.	<b>Priority creditor's name and mailing address</b>  SOSA JR., JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.882.	<b>Priority creditor's name and mailing address</b>  SOTO KILOS, MARIA M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.883.	<b>Priority creditor's name and mailing address</b>  SOUPHOMMANICHANH, SOMPHAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.884.	<b>Priority creditor's name and mailing address</b>  SOUTTHIVONG, LORI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

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2.885.	<b>Priority creditor's name and mailing address</b>  SPEIKERS, DONALD Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.886.	<b>Priority creditor's name and mailing address</b>  SPEIKERS, JAMES Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.887.	<b>Priority creditor's name and mailing address</b>  STUART, REBECCA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.888.	<b>Priority creditor's name and mailing address</b>  SUAREZ SERRANO, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.889.	<b>Priority creditor's name and mailing address</b>  SUAREZ ZEPEDA, JUAN M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.890.	<b>Priority creditor's name and mailing address</b>  SUZANNE KISH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.891.	<b>Priority creditor's name and mailing address</b>  SYSAVATH, KY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.892.	<b>Priority creditor's name and mailing address</b>  TAITOS, RS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.893.	<b>Priority creditor's name and mailing address</b>  TEKE, ARTY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.894.	<b>Priority creditor's name and mailing address</b>  TEWELDEBRHAN, GEBREHIWET Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.895.	<b>Priority creditor's name and mailing address</b>  TEXAS COMPTROLLER OF PUBLIC ACCOUNTS 111 E. 17TH ST. AUSTIN TX 78774  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (8)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  TAXES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.896.	<b>Priority creditor's name and mailing address</b>  THIESSEN, LAUREN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.897.	<b>Priority creditor's name and mailing address</b>  TIERRABLANCA MONTERRO, JOHNATHAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.898.	<b>Priority creditor's name and mailing address</b>  TIJERINA, ASHLEY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.899.	<b>Priority creditor's name and mailing address</b>  TILTON, ADRIAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.900.	<b>Priority creditor's name and mailing address</b>  TINAJERO CABALLERO, JUAN J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.901.	<b>Priority creditor's name and mailing address</b>  TINAJERO IBARRA, MARIO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.902.	<b>Priority creditor's name and mailing address</b>  TINAJERO IBARRA, OMAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.903.	<b>Priority creditor's name and mailing address</b>  TIRADO HERNANDEZ, MA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.904.	<b>Priority creditor's name and mailing address</b>  TIRADO LUNA, PATRICIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.905.	<b>Priority creditor's name and mailing address</b>  TIT, TWOO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.906.	<b>Priority creditor's name and mailing address</b>  TITHER, MUREY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.907.	<b>Priority creditor's name and mailing address</b>  TORRES FLORES, MARIA D. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.908.	<b>Priority creditor's name and mailing address</b>  TORRES MARTINEZ, CECILIA ALEJANDRA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.909.	<b>Priority creditor's name and mailing address</b>  TORRES QUILES, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.910.	<b>Priority creditor's name and mailing address</b>  TORRES RIVERA, NATALIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									
2.911.	<b>Priority creditor's name and mailing address</b>  TORRES, SARINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.912.	<b>Priority creditor's name and mailing address</b>  TOVAR, SANDRA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><td><b>Total claim</b></td></tr><tr><td>UNDETERMINED</td></tr></table>	<b>Total claim</b>	UNDETERMINED	<table border="1" style="width: 100%;"><tr><td><b>Priority amount</b></td></tr><tr><td>UNDETERMINED</td></tr></table>  <table border="1" style="width: 100%;"><tr><td><b>Nonpriority amount</b></td></tr><tr><td>UNDETERMINED</td></tr></table>	<b>Priority amount</b>	UNDETERMINED	<b>Nonpriority amount</b>	UNDETERMINED
<b>Total claim</b>										
UNDETERMINED										
<b>Priority amount</b>										
UNDETERMINED										
<b>Nonpriority amount</b>										
UNDETERMINED										
2.913.	<b>Priority creditor's name and mailing address</b>  TRAN, JERRY Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><td><b>Total claim</b></td></tr><tr><td>UNDETERMINED</td></tr></table>	<b>Total claim</b>	UNDETERMINED	<table border="1" style="width: 100%;"><tr><td><b>Priority amount</b></td></tr><tr><td>UNDETERMINED</td></tr></table>  <table border="1" style="width: 100%;"><tr><td><b>Nonpriority amount</b></td></tr><tr><td>UNDETERMINED</td></tr></table>	<b>Priority amount</b>	UNDETERMINED	<b>Nonpriority amount</b>	UNDETERMINED
<b>Total claim</b>										
UNDETERMINED										
<b>Priority amount</b>										
UNDETERMINED										
<b>Nonpriority amount</b>										
UNDETERMINED										
2.914.	<b>Priority creditor's name and mailing address</b>  TREJO, SIMON Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><td><b>Total claim</b></td></tr><tr><td>UNDETERMINED</td></tr></table>	<b>Total claim</b>	UNDETERMINED	<table border="1" style="width: 100%;"><tr><td><b>Priority amount</b></td></tr><tr><td>UNDETERMINED</td></tr></table>  <table border="1" style="width: 100%;"><tr><td><b>Nonpriority amount</b></td></tr><tr><td>UNDETERMINED</td></tr></table>	<b>Priority amount</b>	UNDETERMINED	<b>Nonpriority amount</b>	UNDETERMINED
<b>Total claim</b>										
UNDETERMINED										
<b>Priority amount</b>										
UNDETERMINED										
<b>Nonpriority amount</b>										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.915.	<b>Priority creditor's name and mailing address</b>  TRISTAN, JOHNNY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.916.	<b>Priority creditor's name and mailing address</b>  TRUJILLO CONTRERAS, ARELY MARLEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.917.	<b>Priority creditor's name and mailing address</b>  TRUJILLO RAMIREZ, AMPARO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.918.	<b>Priority creditor's name and mailing address</b>  TURRUBIARTES, DAVID Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.919.	<b>Priority creditor's name and mailing address</b>  TYRONE GULICK Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.920.	<b>Priority creditor's name and mailing address</b>  U.S. DEPARTMENT OF TREASURY 1500 PENNSYLVANIA AVE NW WASHINGTON DC 20220  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (8)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  TAXES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.921.	<b>Priority creditor's name and mailing address</b>  UITHOVEN, CODY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.922.	<b>Priority creditor's name and mailing address</b>  ULLOA, ALEXANDRA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.923.	<b>Priority creditor's name and mailing address</b>  UNTAL, ALVIN J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.924.	<b>Priority creditor's name and mailing address</b>  UNTAL, CARL M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.925.	<b>Priority creditor's name and mailing address</b>  UOPIY, LAST Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.926.	<b>Priority creditor's name and mailing address</b>  URIBE MEDINA, ALAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.927.	<b>Priority creditor's name and mailing address</b>  VACA MARTINEZ, MARIA E. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.928.	<b>Priority creditor's name and mailing address</b>  VALDEZ GOMEZ, JOSEFINA D. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.929.	<b>Priority creditor's name and mailing address</b>  VALENCIA GUZMAN, ALONDRA Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.930.	<b>Priority creditor's name and mailing address</b>  VALLADARES DIAZ, PEDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.931.	<b>Priority creditor's name and mailing address</b>  VALLEDOR, JUN NERI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.932.	<b>Priority creditor's name and mailing address</b>  VALLEJO, BELINDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.933.	<b>Priority creditor's name and mailing address</b>  VALLES, MONICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.934.	<b>Priority creditor's name and mailing address</b>  VALLS, RACHEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.935.	<b>Priority creditor's name and mailing address</b>  VARA, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.936.	<b>Priority creditor's name and mailing address</b>  VARELA JR., JAVIER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.937.	<b>Priority creditor's name and mailing address</b>  VASQUEZ JIMENEZ, EDUARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.938.	<b>Priority creditor's name and mailing address</b>  VASQUEZ LOPEZ, BRAULIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.939.	<b>Priority creditor's name and mailing address</b>  VASQUEZ, BRITTANY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.940.	<b>Priority creditor's name and mailing address</b>  VASQUEZ, JOHN M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.941.	<b>Priority creditor's name and mailing address</b>  VAZQUEZ GARCIA, VANESSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

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2.942.	<b>Priority creditor's name and mailing address</b>  VAZQUEZ GONZALEZ, JONATHAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.943.	<b>Priority creditor's name and mailing address</b>  VAZQUEZ LOPEZ, ELIZABETH Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED
2.944.	<b>Priority creditor's name and mailing address</b>  VAZQUEZ MEDRANO, MICAELA ARACELI Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <div style="background-color: #f0f0f0; padding: 2px;"><b>Nonpriority amount</b></div> UNDETERMINED

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2.945.	<b>Priority creditor's name and mailing address</b>  VAZQUEZ ROSALES, IRMA PATRICIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.946.	<b>Priority creditor's name and mailing address</b>  VAZQUEZ TAPIA, BRENDA J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.947.	<b>Priority creditor's name and mailing address</b>  VAZQUEZ VITE, ALDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.948.	<b>Priority creditor's name and mailing address</b>  VAZQUEZ, ROSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.949.	<b>Priority creditor's name and mailing address</b>  VEGA CHAVEZ, JOSE A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.950.	<b>Priority creditor's name and mailing address</b>  VEGA GARCIA, FABIOLA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.951.	<b>Priority creditor's name and mailing address</b>  VEGA GARCIA, VICTOR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.952.	<b>Priority creditor's name and mailing address</b>  VEGA GONZALEZ, JUAN C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.953.	<b>Priority creditor's name and mailing address</b>  VEGA HERNANDEZ, ROBERTO C. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.954.	<b>Priority creditor's name and mailing address</b>  VEGA MARTINEZ, VERONICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.955.	<b>Priority creditor's name and mailing address</b>  VEGA MEDINA, JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.956.	<b>Priority creditor's name and mailing address</b>  VEGA SERRATO, SERGIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.957.	<b>Priority creditor's name and mailing address</b>  VEGA VAZQUEZ, ANDREA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.958.	<b>Priority creditor's name and mailing address</b>  VEGA VEGA, KELVIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.959.	<b>Priority creditor's name and mailing address</b>  VEGA, JORGE A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.960.	<b>Priority creditor's name and mailing address</b>  VERA RODRIGUEZ, OSCAR M. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.961.	<b>Priority creditor's name and mailing address</b>  VICENTE MORALES, INGRID Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.962.	<b>Priority creditor's name and mailing address</b>  VICENTE MORALES, MACARENA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.963.	<b>Priority creditor's name and mailing address</b>  VILLA QUINTEROS, EDGAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.964.	<b>Priority creditor's name and mailing address</b>  VILLAFUERTE LOPEZ, KARINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.965.	<b>Priority creditor's name and mailing address</b>  VILLAGOMEZ BLANCO, DANIEL J. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.966.	<b>Priority creditor's name and mailing address</b>  VILLAGRAN LOPEZ, FRANKLIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.967.	<b>Priority creditor's name and mailing address</b>  VILLANUEVA RODRIGUEZ, JOSE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.968.	<b>Priority creditor's name and mailing address</b>  VILLARREAL, ASTRID Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.969.	<b>Priority creditor's name and mailing address</b>  VILLARREAL, FRANCISCO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.970.	<b>Priority creditor's name and mailing address</b>  VILLARREAL, KARINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED
2.971.	<b>Priority creditor's name and mailing address</b>  VILLARREAL, PETER Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b> UNDETERMINED	<b>Priority amount</b> UNDETERMINED  <b>Nonpriority amount</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.972.	<b>Priority creditor's name and mailing address</b>  VILLEGAS, BRENDA B. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.973.	<b>Priority creditor's name and mailing address</b>  VITE, GERARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.974.	<b>Priority creditor's name and mailing address</b>  VITE, JEAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.975.	<b>Priority creditor's name and mailing address</b>  WAH, HSAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.976.	<b>Priority creditor's name and mailing address</b>  WALLERT, KARYN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.977.	<b>Priority creditor's name and mailing address</b>  WARWICK, JAMIE Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.978.	<b>Priority creditor's name and mailing address</b>  WATERS, BRITTANY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.979.	<b>Priority creditor's name and mailing address</b>  WILKING, ABIGAIL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.980.	<b>Priority creditor's name and mailing address</b>  WILLIAMS, PAUL Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
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Priority amount										
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UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.981.	<b>Priority creditor's name and mailing address</b>  WOIZESCHKE, KRIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.982.	<b>Priority creditor's name and mailing address</b>  WORKU, TARIKU Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.983.	<b>Priority creditor's name and mailing address</b>  WYLIE, ANTHONY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.984.	<b>Priority creditor's name and mailing address</b>  XAYPHANTHO, BOUNKHOM Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Nonpriority amount	UNDETERMINED
Total claim	Priority amount									
UNDETERMINED	UNDETERMINED									
Nonpriority amount										
UNDETERMINED										
2.985.	<b>Priority creditor's name and mailing address</b>  YANEZ ZUNIGA, ROBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Nonpriority amount	UNDETERMINED
Total claim	Priority amount									
UNDETERMINED	UNDETERMINED									
Nonpriority amount										
UNDETERMINED										
2.986.	<b>Priority creditor's name and mailing address</b>  YATES, TRAVIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Nonpriority amount	UNDETERMINED
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2.987.	<b>Priority creditor's name and mailing address</b>  YBANEZ II, CAYETANO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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Nonpriority amount										
UNDETERMINED										
2.988.	<b>Priority creditor's name and mailing address</b>  YBARRA LOPEZ III, GUILLERMO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.989.	<b>Priority creditor's name and mailing address</b>  YBARRA, NATHAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
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2.990.	<b>Priority creditor's name and mailing address</b>  YESTRAU, RANDY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.991.	<b>Priority creditor's name and mailing address</b>  YIMER, FATO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.992.	<b>Priority creditor's name and mailing address</b>  ZAMORA BARAJAS, REYNA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.993.	<b>Priority creditor's name and mailing address</b>  ZAMORA LULE, JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.994.	<b>Priority creditor's name and mailing address</b>  ZAMORA TAPIA, PEDRO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.995.	<b>Priority creditor's name and mailing address</b>  ZAMORA, DIANA Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.996.	<b>Priority creditor's name and mailing address</b>  ZAMORA, JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.997.	<b>Priority creditor's name and mailing address</b>  ZARAGOZA, FRANCISCO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.998.	<b>Priority creditor's name and mailing address</b>  ZARATE, KATHY Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

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2.999.	<b>Priority creditor's name and mailing address</b>  ZARATE, LEONARDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.1000.	<b>Priority creditor's name and mailing address</b>  ZAVALA ZAVALA, ISAAC ALBERTO A. Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED
2.1001.	<b>Priority creditor's name and mailing address</b>  ZAW, KYAW Address Intentionally Omitted  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Total claim</b>  UNDETERMINED	<b>Priority amount</b>  UNDETERMINED  <b>Nonpriority amount</b>  UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.1002.	<b>Priority creditor's name and mailing address</b>  ZEPEDA AVILA, MARCOS U. Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>  <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.1003.	<b>Priority creditor's name and mailing address</b>  ZEPEDA AVILA, RODRIGO Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>  <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										
2.1004.	<b>Priority creditor's name and mailing address</b>  ZEPEDA MARTINEZ, RUBI Address Intentionally Omitted   <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b>  ACCRUED WAGES & PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>UNDETERMINED</td></tr></table>	Total claim	UNDETERMINED	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>  <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>UNDETERMINED</td></tr></table>	Priority amount	UNDETERMINED	Nonpriority amount	UNDETERMINED
Total claim										
UNDETERMINED										
Priority amount										
UNDETERMINED										
Nonpriority amount										
UNDETERMINED										

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**2.1005. **Priority creditor's name and mailing address**ZEPEDA VICTORIA, MARCOS  
Address Intentionally Omitted**Date or dates debt was incurred**

VARIOUS

**Last 4 digits of account number:****Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (4)**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
- ☒ Unliquidated
- ☒ Disputed

**Basis for the claim:**

ACCRUED WAGES &amp; PTO

**Is the claim subject to offset?**

- ☒ No
- ☐ Yes

**Total claim**

UNDETERMINED

**Priority amount**

UNDETERMINED

**Nonpriority amount**

UNDETERMINED

2.1006. **Priority creditor's name and mailing address**ZIN, MOE  
Address Intentionally Omitted**Date or dates debt was incurred**

VARIOUS

**Last 4 digits of account number:****Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (4)**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
- ☒ Unliquidated
- ☒ Disputed

**Basis for the claim:**

ACCRUED WAGES &amp; PTO

**Is the claim subject to offset?**

- ☒ No
- ☐ Yes

**Total claim**

UNDETERMINED

**Priority amount**

UNDETERMINED

**Nonpriority amount**

UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

**3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1.	<b>Nonpriority creditor's name and mailing address</b>  3M COMPANY 3M CENTER SAINT PAUL MN 55144-1000	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b>  \$7,999.22
	<b>Date or dates debt was incurred</b>  VARIOUS	<b>Basis for the claim:</b>  ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2.	<b>Nonpriority creditor's name and mailing address</b>  A PORTUS FREIGHT FORWARDING SERVICES LLC 10724 S SUGAR RD PHARR TX 78557	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b>  \$300.00
	<b>Date or dates debt was incurred</b>  VARIOUS	<b>Basis for the claim:</b>  ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3.	<b>Nonpriority creditor's name and mailing address</b>  A+ SYSTEMS GROUP 301 NORTH SECOND STREET MANKATO MN 56001	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b>  \$177.67
	<b>Date or dates debt was incurred</b>  VARIOUS	<b>Basis for the claim:</b>  ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.4.	<b>Nonpriority creditor's name and mailing address</b> ABANIL, JEROME Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$27.07
	<b>Date or dates debt was incurred</b> 12/14/2022	<b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5.	<b>Nonpriority creditor's name and mailing address</b> ABBEY PACKAGING EQUIPMENT LTD. 5030 S SERVICE RD BURLINGTON ON L7L 5Y7 CANADA	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$147.64
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6.	<b>Nonpriority creditor's name and mailing address</b> ACTION MANUFACTURING INC 100 EAST ERIE AVENUE PHILADELPHIA PA 19134	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$1,130.94
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.7.	<b>Nonpriority creditor's name and mailing address</b> ADP INC ONE ADP BOULEVARD ROSELAND NJ 07068  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b>  \$14.00
3.8.	<b>Nonpriority creditor's name and mailing address</b> AGUERO, ISAAC Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/7/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b>  \$1,239.20
3.9.	<b>Nonpriority creditor's name and mailing address</b> AIRGAS USA LLC 259 NORTH RADNOR-CHESTER ROAD RADNOR PA 19087-5283  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b>  \$1,708.49

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3.10.	<b>Nonpriority creditor's name and mailing address</b> AJC INTERNATIONAL 1000 ABERNATHY RD NE SUITE 600 ATLANTA GA 30328  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$266.22
3.11.	<b>Nonpriority creditor's name and mailing address</b> ALL POWER INC 13141 MOLETTE STREET SANTA FE SPRINGS CA 90670  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,205.60
3.12.	<b>Nonpriority creditor's name and mailing address</b> ALLEN LUND COMPANY LLC 4529 ANGELES CREST HWY LA CAÑADA CA 91011  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$101,724.00

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3.13.	<b>Nonpriority creditor's name and mailing address</b> ALONSO TIERRABLANCA, FERNANDO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/19/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,549.23
3.14.	<b>Nonpriority creditor's name and mailing address</b> ALPHA WIRELESS COMMUNICATION 1115 CROSS ST NORTH MANKATO MN 56003-2115  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,453.46
3.15.	<b>Nonpriority creditor's name and mailing address</b> ALTA LANGUAGE SERVICES 3355 LENOX ROAD ATLANTA GA 30326  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$300.00

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3.16.	<b>Nonpriority creditor's name and mailing address</b> AMCOR FLEXIBLES NORTH AMERICA INC. 3 PARKWAY NORTH DEERFIELD IL 60015  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$297,434.84
3.17.	<b>Nonpriority creditor's name and mailing address</b> AMERICAN PEST CONTROL 509 BURRELL AVE LEWISTON ID 83501  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$107.88
3.18.	<b>Nonpriority creditor's name and mailing address</b> AMERICAN RED CROSS HEALTH & SAFETY SERV 430 17TH STREET NW WASHINGTON DC 20001  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,848.00

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3.19.	<b>Nonpriority creditor's name and mailing address</b> AMERICOLD LOGISTICS, LLC - NEWPORT 10 GLENLAKE PARKWAY ATLANTA GA 30328  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,151.00
3.20.	<b>Nonpriority creditor's name and mailing address</b> ANDERSON, BRADLEY Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/27/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$17,035.88
3.21.	<b>Nonpriority creditor's name and mailing address</b> ANRITSU INFIVIS, INC. 5-1-1 ONNA ATSUGI 243-0032 JAPAN  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$751.18

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3.22.	<b>Nonpriority creditor's name and mailing address</b> APPLIED PRODUCTS INC 6035 BAKER ROAD MINNETONKA MN 55345-5908  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,250.24
3.23.	<b>Nonpriority creditor's name and mailing address</b> ARAMARK 2400 MARKET STREET PHILADELPHIA PA 19103  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$25,192.17
3.24.	<b>Nonpriority creditor's name and mailing address</b> ARNOLD BROS TRANSPORT LTD 739 LAGIMODIERE BOULEVARD WINNIPEG MB R2J 0T8 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$133,658.52

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3.25.	<b>Nonpriority creditor's name and mailing address</b> ASSOCIATED MATERIAL HANDLING INDUSTRIES INC. 133 NORTH SWIFT ROAD ADDISON IL 60101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,157.12
3.26.	<b>Nonpriority creditor's name and mailing address</b> ASSOCIATED WHOLESALE GROCERS (AWG) 5000 KANSAS AVENUE KANSAS CITY KS 66106  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$120.00
3.27.	<b>Nonpriority creditor's name and mailing address</b> AT PACKAGING NO 64 FORTFEILD ROAD TERENURE DUBLIN DUBLIN 662831 IRELAND  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$7,293.55

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3.28.	<b>Nonpriority creditor's name and mailing address</b> AVOIR HYLIFE MEXICO S.A. DE C.C CAMINOS DE GUANAJUATO 20 LA ANGOSTURA COL 38900 MEXICO  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,476.77
3.29.	<b>Nonpriority creditor's name and mailing address</b> BACKCOUNTRY SERVICES LLC 9904 W AIRCRAFT CT WASILLA AK 99623  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,538.25
3.30.	<b>Nonpriority creditor's name and mailing address</b> BALDWIN SUPPLY COMPANY 601-11TH AVENUE SOUTH MINNEAPOLIS MN 55415  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,444.22

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3.31.	<b>Nonpriority creditor's name and mailing address</b> BARNETT PRO CARE 6TH AVE WINODOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$8,284.00
3.32.	<b>Nonpriority creditor's name and mailing address</b> BARRERA CORTIDOR, HUGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/4/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,715.81
3.33.	<b>Nonpriority creditor's name and mailing address</b> BCBS OF MINNESOTA***** PAD***** 3535 BLUE CROSS ROAD EAGAN MN 55122-1154  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$59,520.50

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3.34.	<b>Nonpriority creditor's name and mailing address</b> BELMARK INC 331 CHANGEBRIDGE RD PINE BROOK NJ 07058  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,387.00
3.35.	<b>Nonpriority creditor's name and mailing address</b> BENNETT TRUCKING INC 8 EAST STREET SHEFFIELD S21 3UJ UNITED KINGDOM  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$19,877.58
3.36.	<b>Nonpriority creditor's name and mailing address</b> BETTCHER INDUSTRIES INC 6801 STATE ROUTE 60 BIRMINGHAM OH 44816  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$12,766.35

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3.37.	<b>Nonpriority creditor's name and mailing address</b> BLAINE BROTHERS INC. 10011 XYLITE STREET NE MINNEAPOLIS MN 55449  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,573.75
3.38.	<b>Nonpriority creditor's name and mailing address</b> BLOUNT, KATHERINE Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 10/31/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$19.55
3.39.	<b>Nonpriority creditor's name and mailing address</b> BOB'S BIFFYS LLC 667 240TH AVE FAIRMONT MN 56031  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,390.00

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3.40.	<b>Nonpriority creditor's name and mailing address</b> BORDER CITY USA INC. 8350 ST AUBIN DOOR 7 HAMTRAMCK MI 48211  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,129.50
3.41.	<b>Nonpriority creditor's name and mailing address</b> BORDER STATES INDUSTRIES INC 2400 SOUTH 38TH STREET FARGO ND 58104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,026.65
3.42.	<b>Nonpriority creditor's name and mailing address</b> BOTELLO MEZA, JORGE L Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 1/30/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$76.57

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3.43.	<b>Nonpriority creditor's name and mailing address</b> BRABAZON PUMP CO LTD 2484 CENTURY ROAD GREEN BAY WI 54303-4802  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$18,538.03
3.44.	<b>Nonpriority creditor's name and mailing address</b> BRHB INC. DBA GODFATHER'S PIZZA 2808 NORTH 108TH STREET OMAHA NE 68164  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$314.29
3.45.	<b>Nonpriority creditor's name and mailing address</b> BUNE, WEGEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 10/21/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,441.98

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3.46.	<b>Nonpriority creditor's name and mailing address</b> BUNZL PROCESSOR DIVISION 5710 NW 41ST ST RIVERSIDE MO 64150  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$74,582.10
3.47.	<b>Nonpriority creditor's name and mailing address</b> BUTLER TRANSPORT INC. 347 NORTH JAMES STREET KANSAS CITY KS 66118-1140  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,900.00
3.48.	<b>Nonpriority creditor's name and mailing address</b> CABELLERO, MARIA MELEDEZ Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED

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3.49.	<b>Nonpriority creditor's name and mailing address</b> CALDERON CABRERA, LUZ M Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/8/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,120.10
3.50.	<b>Nonpriority creditor's name and mailing address</b> CAMACHO, RAMON Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED
3.51.	<b>Nonpriority creditor's name and mailing address</b> CAMACHO, RAMON Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/16/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$137,237.43

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3.52.	<b>Nonpriority creditor's name and mailing address</b> CAMPOS MURILLO, ROSARIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/1/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$285.46
3.53.	<b>Nonpriority creditor's name and mailing address</b> CANADIAN AMERICAN BOXED MEAT CORP 6905 KENDERRY GATE MISSISSAUGA ON L5T 2Y8 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$883.00
3.54.	<b>Nonpriority creditor's name and mailing address</b> CANWIN FARMS, LLC 319 S COTEAU ST PIERRE SD 57501  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> INTERCOMPANY ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,012,060.59

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3.55.	<b>Nonpriority creditor's name and mailing address</b> CARLISLE TECHNOLOGY US 3312 MAINWAY DRIVE BURLINGTON ON L7M 1A7 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,450.92
3.56.	<b>Nonpriority creditor's name and mailing address</b> CARLSON & STEWART REFRIGERATION INC 700 HURON ROAD MARSHALL MN 56258  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,183.74
3.57.	<b>Nonpriority creditor's name and mailing address</b> CARMONA MEDRANO, BRANDON Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/1/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$934.45

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3.58.	<b>Nonpriority creditor's name and mailing address</b> CENTERPOINT ENERGY Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,925.08
3.59.	<b>Nonpriority creditor's name and mailing address</b> CENTIMARK CORP 12 GRANDVIEW CIRCLE CANONSBURG PA 15317  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,111,733.00
3.60.	<b>Nonpriority creditor's name and mailing address</b> CERDA RODRIGUEZ, ROSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/30/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,783.00

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3.61.	<b>Nonpriority creditor's name and mailing address</b> CHALLENGER LOGISTICS INTERNATIONAL INC. 311 W SUPERIOR ST STE 110 CHICAGO IL 60654-3548  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$56,830.00
3.62.	<b>Nonpriority creditor's name and mailing address</b> CHARLES E. BLUMER COMPANY, INC 252 IRONWOOD CIR ELKINS PARK PA 19027  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$15,916.92
3.63.	<b>Nonpriority creditor's name and mailing address</b> CHAVEZ TRUJILLO, MIGUEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/11/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$469.55

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3.64.	<b>Nonpriority creditor's name and mailing address</b> CHONKO TRUCKING LLC 76312 520TH AVENUE JACKSON MN 56143  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,800.00
3.65.	<b>Nonpriority creditor's name and mailing address</b> CIRCLE T TRANSPORT INC 347 THOMAS ST NORTH WILKESBORO NC 28659  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$16,625.00
3.66.	<b>Nonpriority creditor's name and mailing address</b> CITY OF NORTH MANKATO *NON PAD* P.O. BOX 2055 NORTH MANKATO MN 56002  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$50,833.33

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3.67.	<b>Nonpriority creditor's name and mailing address</b> CLANTON, JACKSON Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$1,437.36
	<b>Date or dates debt was incurred</b> 1/14/2023	<b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.68.	<b>Nonpriority creditor's name and mailing address</b> CODE PACK LLC 30198 E RIVERWAY PINE CITY MN 55063	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$912.84
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.69.	<b>Nonpriority creditor's name and mailing address</b> COLDPOINT LOGISTICS WAREHOUSE LLC 5015 NW CANAL STREET RIVERSIDE MO 64150	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$53,522.18
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.70.	<b>Nonpriority creditor's name and mailing address</b> COMPCORE PRO 2625 W.HARRISON BELLWOOD IL 60104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,334.00
3.71.	<b>Nonpriority creditor's name and mailing address</b> CONSOLIDATED COMMUNICATIONS 2116 SOUTH 17TH STREET MATTOON IL 61938-5973  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,547.02
3.72.	<b>Nonpriority creditor's name and mailing address</b> CONTINENTAL CARBONIC PRODUCTS INC 3985 EAST HARRISON AVENUE DECATUR IL 62526  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$31,650.31

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3.73.	<b>Nonpriority creditor's name and mailing address</b> CONVERGINT TECHNOLOGIES LLC ONE COMMERCE DR SCHAUMBURG IL 60173-5323  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$32,061.78
3.74.	<b>Nonpriority creditor's name and mailing address</b> COOL PORT OAKLAND 251 LITTLE FALLS DRIVE WILMINGTON DE 19808  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$12,248.41
3.75.	<b>Nonpriority creditor's name and mailing address</b> COSTALES, JULIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 3/9/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,133.00

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3.76.	<b>Nonpriority creditor's name and mailing address</b> COTTONWOOD COUNTY AUDITOR/TREASURER 300 3RD AVE WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$210,059.00
3.77.	<b>Nonpriority creditor's name and mailing address</b> COYOTE LOGISTICS LLC Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$86,900.20
3.78.	<b>Nonpriority creditor's name and mailing address</b> CROSSROADS TRAILER SALES & SERVICE INC. 2501 CROSSROADS BLVD ALBERT LEA MN 56007-4002  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$24,016.73

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3.79.	<b>Nonpriority creditor's name and mailing address</b> CROWN EQUIPMENT CORPORATION 44 SOUTH WASHINGTON STREET NEW BREMEN OH 45869  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$150,398.82
3.80.	<b>Nonpriority creditor's name and mailing address</b> CULLIGAN WATER (CULLIGAN OF JACKSON) 154 BRENTWOOD DRIVE SUITE 1 COLCHESTER VT 05446  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,150.16
3.81.	<b>Nonpriority creditor's name and mailing address</b> DAH, EH MAY Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 9/14/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,228.97

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3.82.	<b>Nonpriority creditor's name and mailing address</b> DAKOTA FLUID POWER 3409 NORTH LEWIS AVENUE SIOUX FALLS SD 57104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,993.56
3.83.	<b>Nonpriority creditor's name and mailing address</b> DC LEGISLATIVE REGULATORY SERVICE 901 N. GLEBE ROAD, ARLINGTON VA 22203  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,900.00
3.84.	<b>Nonpriority creditor's name and mailing address</b> DE SOTOYO, MARIA PORTES FITCH JOHNSON LARSON Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED

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3.85.	<b>Nonpriority creditor's name and mailing address</b> DELTA DENTAL OF MINNESOTA ASO *PAD* 500 WASHINGTON AVENUE, SOUTH MINNEAPOLIS MN 55415-1163  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,324.12
3.86.	<b>Nonpriority creditor's name and mailing address</b> DIAMOND OIL COMPANY 2003 COMMERCE DRIVE MIDLAND TX 79703  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$9,510.35
3.87.	<b>Nonpriority creditor's name and mailing address</b> DIAZ, ADRIAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 1/10/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$552.50

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3.88.	<b>Nonpriority creditor's name and mailing address</b> DICK'S WELDING 121 16TH STREET WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$43,877.64
3.89.	<b>Nonpriority creditor's name and mailing address</b> DOMINGUEZ MARTINEZ, JUAN A Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 1/13/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$31,943.00
3.90.	<b>Nonpriority creditor's name and mailing address</b> DOUBLE D DISPATCH 1791 160TH AVE FAIRMONT MN 56031  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$8,075.00

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3.91.	<b>Nonpriority creditor's name and mailing address</b> DUENES, BRENDA Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$1,283.00
	<b>Date or dates debt was incurred</b> 12/15/2022	<b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.92.	<b>Nonpriority creditor's name and mailing address</b> DXP ENTERPRISES INC 5301 HOLLISTER STREET HOUSTON TX 77040	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$988.57
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.93.	<b>Nonpriority creditor's name and mailing address</b> ECHO GROUP INC. 15 WASHINGTON STREET CONWAY NH 03818	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$3,618.64
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.94.	<b>Nonpriority creditor's name and mailing address</b> ECOLAB 1 ECOLAB PLACE SAINT PAUL MN 55102-2233	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$96,788.40
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.95.	<b>Nonpriority creditor's name and mailing address</b> EMKAT (BARCODES) 10300 10TH AVE N PLYMOUTH MN 55441	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$2,020.35
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.96.	<b>Nonpriority creditor's name and mailing address</b> ENGLAND LOGISTICS 1325 SOUTH 4700 WEST SALT LAKE CITY UT 84104	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$2,235.00
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.97.	<b>Nonpriority creditor's name and mailing address</b> ESPARZA, HECTOR Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/3/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$60.07
3.98.	<b>Nonpriority creditor's name and mailing address</b> ETSE, NOAMESSI Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/8/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$69.05
3.99.	<b>Nonpriority creditor's name and mailing address</b> ETSE, NOAMESSI Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 7/26/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,157.76

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3.100.	<b>Nonpriority creditor's name and mailing address</b> EUROFINS ANALYTICAL LABORATORIES INC 2219 LAKESHORE DR #500 NEW ORELANS LA 70122  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$9,231.78
3.101.	<b>Nonpriority creditor's name and mailing address</b> EXPRESS FREIGHT HANDLERS INC. 50 EMJAY BOULEVARD BRENTWOOD NY 11717  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,800.00
3.102.	<b>Nonpriority creditor's name and mailing address</b> EYEMED 4000 LUXOTTICA PLACE MASON OH 45040  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,994.97

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3.103.	<b>Nonpriority creditor's name and mailing address</b> FARMERS TRANS CANADA 86 WHITEFIELD RD WINNIPEG MB R3C 2E6 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$14,372.25
3.104.	<b>Nonpriority creditor's name and mailing address</b> FED EX FREIGHT 2200 FORWARD DRIVE HARRISON AR 72601-2004  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,710.88
3.105.	<b>Nonpriority creditor's name and mailing address</b> FELIX, RAFINE Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/18/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,283.00

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3.106.	<b>Nonpriority creditor's name and mailing address</b> FIRE CONSTRUCTION SERVICES  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$13,789.00
3.107.	<b>Nonpriority creditor's name and mailing address</b> FIRST CALL LOGISTICS LLC 3608 INDUSTRIAL PKWY BIRMINGHAM AL 35217  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$156,847.00
3.108.	<b>Nonpriority creditor's name and mailing address</b> FIVE STAR LOGISTICS AND DISTRIBUTION SERVICES 1601 39TH STREET NORTH TAMPA FL 33605  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$360,923.60

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3.109.	<b>Nonpriority creditor's name and mailing address</b> FLEET PROFIT CENTER INC 65 BLUE SUN DRIVE WINNIPEG MB R3X 0G7 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$72.00
3.110.	<b>Nonpriority creditor's name and mailing address</b> FLEXSOL PACKAGING CORP DBA ISOFLEX PACKA 1531 NW 12TH AVENUE POMPANO BEACH FL 33069  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$59,850.00
3.111.	<b>Nonpriority creditor's name and mailing address</b> FLORES MANCERA, ROBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 8/19/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$14,613.30

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3.112.	<b>Nonpriority creditor's name and mailing address</b> FONSECA HERNANDEZ, LUIS Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/9/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,283.00
3.113.	<b>Nonpriority creditor's name and mailing address</b> FOOD SOURCE INTERNATIONAL INC. 753 SPRINGDALE DR EXTON PA 19341  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,714.64
3.114.	<b>Nonpriority creditor's name and mailing address</b> FORTUNE LOGISTICS 9 PANTYGRAIGWEN ROAD PONTYPRIDD CF37 2RR UNITED KINGDOM  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$35,825.00

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3.115.	<b>Nonpriority creditor's name and mailing address</b> FORTUNE TRANSPORTATION 93702 470TH AVE WINDOM MN 56101-4201  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$32,962.49
3.116.	<b>Nonpriority creditor's name and mailing address</b> FP MAILING SOLUTIONS 140 NORTH MITCHELL COURT ADDISON IL 60101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$339.33
3.117.	<b>Nonpriority creditor's name and mailing address</b> FREDRIKSON & BYRON P.A. 200 SOUTH SIXTH STREET MINNEAPOLIS MN 55402-1425  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$868.50

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3.118.	<b>Nonpriority creditor's name and mailing address</b> FRIENDS DRIVING FRIENDS 1801 PLEASANT VIEW DRIVE NORTH MANKATO MN 56003  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$100.00
3.119.	<b>Nonpriority creditor's name and mailing address</b> FRONTMATEC INC. 51 RTE MORISSETTE - SAINT-ANSELME QC G0R2N0 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$77,295.11
3.120.	<b>Nonpriority creditor's name and mailing address</b> FROZEN ASSETS COLD STORAGE LLC Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,416.82

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3.121.	<b>Nonpriority creditor's name and mailing address</b> G2 LOGISTICS TRANSPORT INC. 944 HENRY AVE WINNIPEG MB R3E 3L2 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$63,471.28
3.122.	<b>Nonpriority creditor's name and mailing address</b> GARCIA, BRANDON Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED
3.123.	<b>Nonpriority creditor's name and mailing address</b> GARRIDO MANDUJANO, MARISELA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED

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3.124.	<b>Nonpriority creditor's name and mailing address</b> GARRIDO MANDUJANO, MARISELA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 7/25/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$48,906.06
3.125.	<b>Nonpriority creditor's name and mailing address</b> GARTNER REFRIGERATION 13205 16TH AVENUE NORTH MINNEAPOLIS MN 55441-4566  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$127,349.06
3.126.	<b>Nonpriority creditor's name and mailing address</b> GLEN TAYLOR GAT FARMS LLC 1725 ROE CREST DRIVE NORTH MANKATO MN 56003  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$475,118.76

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3.127.	<b>Nonpriority creditor's name and mailing address</b> GLOBAL INDUSTRIAL 11 HARBOR PARK DRIVE PORT WASHINGTON NY 11050  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,811.18
3.128.	<b>Nonpriority creditor's name and mailing address</b> GLOBETROTTER TRANSPORTATION INC. 371 VLY POINTE DR ELKINS PARK WV 26241  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$46,841.48
3.129.	<b>Nonpriority creditor's name and mailing address</b> GOHMANN SUPPLY LLC 23784 - 67TH AVENUE ST. CLOUD MN 56301  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,349.91

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3.130.	<b>Nonpriority creditor's name and mailing address</b> GONZALEZ, DALTON Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/3/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,294.91
3.131.	<b>Nonpriority creditor's name and mailing address</b> GONZALEZ, JAMIE Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/7/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,873.78
3.132.	<b>Nonpriority creditor's name and mailing address</b> GRABOW, NEIL Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 3/27/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,945.24

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3.133.	<b>Nonpriority creditor's name and mailing address</b> GRAINGER 100 GRAINGER PARKWAY LAKE FOREST IL 60045-5201  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$12,442.86
3.134.	<b>Nonpriority creditor's name and mailing address</b> GRANADOS GARCIA, ROSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 3/22/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,294.00
3.135.	<b>Nonpriority creditor's name and mailing address</b> GRANITE CITY REAL ESTATE 202 NORTH CENTER STREET BLOOMINGTON IL 61701  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,372.00

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3.136.	<b>Nonpriority creditor's name and mailing address</b> GREEN, LANNY Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/28/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11,333.46
3.137.	<b>Nonpriority creditor's name and mailing address</b> GREGORY STROBEL 1751 623RD AVENUE PEMBERTON MN 56078  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$559,318.19
3.138.	<b>Nonpriority creditor's name and mailing address</b> GRUBER, GREG Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,300.00

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3.139.	<b>Nonpriority creditor's name and mailing address</b> H2O INNOVATION USA 8900 109TH AVE N CHAMPLIN MN 55316  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,500.00
3.140.	<b>Nonpriority creditor's name and mailing address</b> HANSEN TRUCKING 290 EAST WILLIAMS FIELD GILBERT AZ 85295  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$7,855.00
3.141.	<b>Nonpriority creditor's name and mailing address</b> HANTOVER INC 5200 WEST 110TH STREET OVERLAND PARK MO 66211  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$31,808.94

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3.142.	<b>Nonpriority creditor's name and mailing address</b> HARVEST MEATS LOS ANGELES 2900 AYERS AVE VERNON CA 90058  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,384.30
3.143.	<b>Nonpriority creditor's name and mailing address</b> HAWKINS INC 2381 ROSEGATE ROSEVILLE MN 55113  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$21,194.28
3.144.	<b>Nonpriority creditor's name and mailing address</b> HENNING RENTAL INC 80063 US-71 JACKSON MN 56143  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$21,145.80

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3.145.	<b>Nonpriority creditor's name and mailing address</b> HENNING RENTAL INC 80063 US-71 JACKSON MN 56143  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,635.18
3.146.	<b>Nonpriority creditor's name and mailing address</b> HERMEL WHOLESALE 23099 N. RIVERFRONT DRIVE MANKATO MN 56001-5993  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,812.50
3.147.	<b>Nonpriority creditor's name and mailing address</b> HERNANDEZ ULLOA, EDGAR D Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 1/24/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,283.00

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3.148.	<b>Nonpriority creditor's name and mailing address</b> HERNANDEZ VEGA, MABEL Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$6,383.00
	<b>Date or dates debt was incurred</b> 12/21/2022	<b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.149.	<b>Nonpriority creditor's name and mailing address</b> HEYL LOGISTICS 37648 LOCK ST DADE CITY FL 33523-2856	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$6,841.80
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.150.	<b>Nonpriority creditor's name and mailing address</b> HEYL TRUCK LINES INC. 220 NORKA DRIVE AKRON IA 51001	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$550.00
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.151.	<b>Nonpriority creditor's name and mailing address</b> HIGLEY FORD SALES CO. 1065 3RD AVENUE WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$41.81
3.152.	<b>Nonpriority creditor's name and mailing address</b> HILL BROTHERS LOGISTICS 7850 I ST OMAHA NE 68127  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$39,683.90
3.153.	<b>Nonpriority creditor's name and mailing address</b> HIRSCHBACH TRANSPORTATION SERVICES 2460 KERPER BLVD DUBQUQUE IA 52003  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$18,884.70

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3.154.	<b>Nonpriority creditor's name and mailing address</b> HOMETOWN SANITATION SERVICES LLC 1041 3RD AVE WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,273.68
3.155.	<b>Nonpriority creditor's name and mailing address</b> HTF SOLUTIONS 2433 N CHARLES ST NORTH SAINT PAUL MN 55109  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,200.00
3.156.	<b>Nonpriority creditor's name and mailing address</b> HUTCHESON ENGINEERING 79 PILGRIMS LANE NORTHAMPTON NN7 3PJ UNITED KINGDOM  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,011.99

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3.157.	<b>Nonpriority creditor's name and mailing address</b> HYLIFE FOOD INTERNATIONAL LIMITED 623 MAIN STREET EAST NEEPAWA MB R0J 1H0 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> INTERCOMPANY ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$65,641.67
3.158.	<b>Nonpriority creditor's name and mailing address</b> HYLIFE FOODS LP 623 MAIN STREET EAST NEEPAWA MB R0J 1H0 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> INTERCOMPANY ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$678,099.80
3.159.	<b>Nonpriority creditor's name and mailing address</b> HYLIFE LTD. 623 MAIN STREET EAST NEEPAWA MB R0J 1H0 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> INTERCOMPANY ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,020,133.36

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3.160.	<b>Nonpriority creditor's name and mailing address</b> HY-VEE 5820 WESTOWN PARKWAY WEST DES MOINES IA 50266-8223  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$98.32
3.161.	<b>Nonpriority creditor's name and mailing address</b> I+S GROUP 235-241 KINGSBURY ROAD LONDON NW9 8UG UNITED KINGDOM  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,987.50
3.162.	<b>Nonpriority creditor's name and mailing address</b> IBEAM SYSTEMS INC DBA IBEAM CONSTRUCTION CAMERAS 5320 W MORRIS HILL RD BOISE ID 83706  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$221.25

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3.163.	<b>Nonpriority creditor's name and mailing address</b> ICECAP COLD STORAGE 1720 16TH AVE COUNCIL BLUFFS IA 51501  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,131.13
3.164.	<b>Nonpriority creditor's name and mailing address</b> ICREST INTERNATIONAL LLC 200 NORTH PACIFIC COAST HIGHWAY EL SEGUNDO CA 90245  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$13,750.03
3.165.	<b>Nonpriority creditor's name and mailing address</b> ID TECHNOLOGY (CANADA) CORP. 10721 WALKER STREET CYPRESS CA 90630  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$19,507.70

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3.166.	<b>Nonpriority creditor's name and mailing address</b> INDUSTRIAL CONSTRUCTION SERVICES INC. 3861 HIGHWAY 411 NE RYDAL GA 30171-1502  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$7,510.00
3.167.	<b>Nonpriority creditor's name and mailing address</b> INDUSTRIAL SERVICE TECHNOLOGIES 3286 KENTLAND CT. SE GRAND RAPIDS MI 48548  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$14,604.00
3.168.	<b>Nonpriority creditor's name and mailing address</b> INTEGRITY EXPRESS LOGISTICS LLC 4420 COOPER RD. BLUE ASH OH 45242  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$24,687.00

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3.169.	<b>Nonpriority creditor's name and mailing address</b> INTERNATIONAL TRADE SOLUTIONS 3357 39TH ST S #3 FARGO ND 58104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$625.00
3.170.	<b>Nonpriority creditor's name and mailing address</b> JAMES, JAY JAY Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 8/18/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,701.23
3.171.	<b>Nonpriority creditor's name and mailing address</b> JARVIS PRODUCTS CORPORATION 33 ANDERSON ROAD MIDDLETOWN CT 06457  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$26,059.95

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3.172.	<b>Nonpriority creditor's name and mailing address</b> JEAR LOGISTICS 3409 SALTERBECK ST. MOUNT PLEASANT SC 29466  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$17,130.00
3.173.	<b>Nonpriority creditor's name and mailing address</b> JESUS ZAMORA LULA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED
3.174.	<b>Nonpriority creditor's name and mailing address</b> JETTER CLEAN 6105 ROME CIRCLE NORTHWEST ROCHESTER MN 55901  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$8,019.50

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3.175.	<b>Nonpriority creditor's name and mailing address</b> JOE BRAKE TRUCKING 13213 EDWARDS AVE WILMONT MN 56185  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$610.00
3.176.	<b>Nonpriority creditor's name and mailing address</b> JOHN S COVEY DBA COVEY TRUCKING 55552 113TH ST MAPLETON ND 56065  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$735.00
3.177.	<b>Nonpriority creditor's name and mailing address</b> JOHNSON FEED COMPANY 305 WEST INDUSTRIAL ROAD CANTON SD 57013  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$7,073.64

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3.178.	<b>Nonpriority creditor's name and mailing address</b> JOSE PAZ-ECHEVERRIA 812 W LAKE AVE WORTHINGTON MN 56187  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$100.00
3.179.	<b>Nonpriority creditor's name and mailing address</b> JUAREZ MEJIA, ANIBAL Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 3/15/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,333.00
3.180.	<b>Nonpriority creditor's name and mailing address</b> JUAREZ, CRYSTAL Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/15/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$973.80

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3.181.	<b>Nonpriority creditor's name and mailing address</b> K & B TRANSPORTATION INC 4700 DAKOTA AVENUE SOUTH SIOUX CITY NE 68776  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$18,407.14
3.182.	<b>Nonpriority creditor's name and mailing address</b> KANSAS CITY SERIES OF LOCKTON COMPANIES LLC 444 WEST 47TH ST. KANSAS CITY MO 64112-1906  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$41,170.44
3.183.	<b>Nonpriority creditor's name and mailing address</b> KEILA ESTELA BLONDET 1685 REDDING AVE WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$100.00

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3.184.	<b>Nonpriority creditor's name and mailing address</b> KENDELL DOORS & HARDWARE INC 1312 NORTHLAND DRIVE MENDOTA HIGHTS MN 55120  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,183.00
3.185.	<b>Nonpriority creditor's name and mailing address</b> KILL, SONIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/2/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11.30
3.186.	<b>Nonpriority creditor's name and mailing address</b> KIRSCH TRANSPORTATION SERVICES INC 25 MAIN PLACE COUNCIL BLUFFS IA 51503-0790  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$64,480.00

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3.187.	<b>Nonpriority creditor's name and mailing address</b> KONICA MINOLTA BUSINESS SOLUTIONS USA IN 100 WILLIAMS DRIVE RAMSEY NJ 07446  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,060.39
3.188.	<b>Nonpriority creditor's name and mailing address</b> KOOLA LOGISTICS 630 WEST CARMEL DRIVE CARMEL IN 46032  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$55,300.00
3.189.	<b>Nonpriority creditor's name and mailing address</b> KSW CORPORATION 31248 OAK CREST DRIVE WESTLAKE VILLAGE CA 91361  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,930.32

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3.190.	<b>Nonpriority creditor's name and mailing address</b> LAKE CRYSTAL COACHES 59780 235TH STREET MADISON LAKE MN 56063  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$46,106.00
3.191.	<b>Nonpriority creditor's name and mailing address</b> LAMAR COMPANIES 5321 CORPORATE BOULEVARD BATON ROUGE LA 70808  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,975.00
3.192.	<b>Nonpriority creditor's name and mailing address</b> LAMPERT LUMBER 1850 COMO AVENUE SAINT PAUL MN 55108  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,994.95

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3.193.	<b>Nonpriority creditor's name and mailing address</b> LAO QUINONES, JUAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 10/25/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,649.40
3.194.	<b>Nonpriority creditor's name and mailing address</b> LAWNCRAFTERS LLC 20895 610TH AVE EAGLE LAKE MN 56024  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,836.00
3.195.	<b>Nonpriority creditor's name and mailing address</b> LAZER LOGISTICS 6525 SHILOH ROAD ALPHARETTA GA 30005  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$36,963.64

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3.196.	<b>Nonpriority creditor's name and mailing address</b> LEGAL SHIELD ONE PRE-PAID WAY ADA OK 74820-5813  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$528.40
3.197.	<b>Nonpriority creditor's name and mailing address</b> LEYVA LEYVA, LIZETH Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/2/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$19.55
3.198.	<b>Nonpriority creditor's name and mailing address</b> LINDE INC FORGE, 43 CHURCH STREET WEST WOKING GU21 6HT UNITED KINGDOM  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$56,862.28

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3.199.	<b>Nonpriority creditor's name and mailing address</b> LINEAGE LOGISTICS PFS, LLC 46500 HUMBOLDT DRIVE NOVI MI 48377  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,945.98
3.200.	<b>Nonpriority creditor's name and mailing address</b> LINEAGE TRANSPORTATION LLC 46500 HUMBOLDT DRIVE NOVI MI 48377  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,709.85
3.201.	<b>Nonpriority creditor's name and mailing address</b> LJP WASTE & RECYCLE LLC 2160 RINGHOFER DR NORTH MANKATO MN 56003-2202  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$7,502.39

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3.202.	<b>Nonpriority creditor's name and mailing address</b> LOADSMART INC. 175 W JACKSON BLVD, CHICAGO IL 60604  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$500.00
3.203.	<b>Nonpriority creditor's name and mailing address</b> LOCKE TRANSPORTATION INC. 7101 S. KOSTNER AVE CHICAGO IL 60629  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$9,055.00
3.204.	<b>Nonpriority creditor's name and mailing address</b> LOPEZ LOPEZ, DELFINA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/3/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$18.82

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3.205.	<b>Nonpriority creditor's name and mailing address</b> LOPEZ, SELENA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/13/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,019.42
3.206.	<b>Nonpriority creditor's name and mailing address</b> LULE SERRANO, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 9/20/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11.30
3.207.	<b>Nonpriority creditor's name and mailing address</b> LUNA, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 6/28/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,082.97

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3.208.	<b>Nonpriority creditor's name and mailing address</b> M.F. CONSTRUCTION INC 2 R DU BRULE ST RIQUIER 80135 FRANCE  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$21,661.11
3.209.	<b>Nonpriority creditor's name and mailing address</b> MAGID GLOVE AND SAFETY 1300 NAPERVILLE DRIVE ROMEIOVILLE IL 60446-1043  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$25,935.03
3.210.	<b>Nonpriority creditor's name and mailing address</b> MALLOY ELECTRIC 809 WEST RUSSELL STREET SIOUX FALLS SD 57104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$894.22

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3.211.	<b>Nonpriority creditor's name and mailing address</b> MARCIELA GARRIDO MANDUJANO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED
3.212.	<b>Nonpriority creditor's name and mailing address</b> MAREL INC. 1024 AIRPORT PKWY GAINSVILLE GA 30501  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$242,735.92
3.213.	<b>Nonpriority creditor's name and mailing address</b> MARKS, ROBERT Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/2/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,153.21

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3.214.	<b>Nonpriority creditor's name and mailing address</b> MARTINEZ ABUNDIZ, CHRISTIAN Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED
3.215.	<b>Nonpriority creditor's name and mailing address</b> MARTINEZ SAMANO, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 8/12/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$49,955.61
3.216.	<b>Nonpriority creditor's name and mailing address</b> MARTINEZ-SAMANO, CARLOS Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED

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3.217.	<b>Nonpriority creditor's name and mailing address</b> MASTER ELECTRIC 1301 OLYMPIC BOULEVARD SANTA MONICA CA 90404  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$283,490.60
3.218.	<b>Nonpriority creditor's name and mailing address</b> MATT SCHARN TRUCKING LLC 2774 205TH STREET NEMAHA IA 50567  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,540.00
3.219.	<b>Nonpriority creditor's name and mailing address</b> MAYNARDS OF MOUNTAIN LAKE 1049 3RD AVE MOUNTAIN LAKE MN 56159  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$179.36

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3.220.	<b>Nonpriority creditor's name and mailing address</b> MCGOWAN WATER CONDITIONING INC. 401 ELEANOR STREET MANKATO MN 56001  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,515.53
3.221.	<b>Nonpriority creditor's name and mailing address</b> MCMASTER CARR SUPPLY COMPANY 600 NORTH COUNTY LINE ROAD ELMHURST IL 60126-2034  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,854.41
3.222.	<b>Nonpriority creditor's name and mailing address</b> MECHANICAL SYSTEMS INC 1001 TUCKASEEGEE ROAD CHARLOTTE NC 28208  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$74,274.50

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3.223.	<b>Nonpriority creditor's name and mailing address</b> MEDIACOM 1 MEDIACOM WAY NEW YORK NY 10918  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,718.44
3.224.	<b>Nonpriority creditor's name and mailing address</b> MEJIA MEDINA, JULIO C Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 3/22/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,533.00
3.225.	<b>Nonpriority creditor's name and mailing address</b> MEL EASTON & SONS INC 13511 192ND ST COUNCIL BLUFFS IA 51503  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$28,972.74

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3.226.	<b>Nonpriority creditor's name and mailing address</b> MELENDEZ CABALLERO, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED
3.227.	<b>Nonpriority creditor's name and mailing address</b> MELO, JAYLER Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 8/1/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$27.80
3.228.	<b>Nonpriority creditor's name and mailing address</b> MENDOZA, YOEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/18/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,169.31

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3.229.	<b>Nonpriority creditor's name and mailing address</b> MILLER BEVCO 6209 RICHARDS DR SHAWNEE KS 66216  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11,282.88
3.230.	<b>Nonpriority creditor's name and mailing address</b> MINNESOTA ENERGY RESOURCES 2665 145TH STREET WEST ROSEMOUNT MN 55068-0455  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$16,235.36
3.231.	<b>Nonpriority creditor's name and mailing address</b> MINNESOTA INVESTMENT PROPERTIES LLC  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$825.00

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3.232.	<b>Nonpriority creditor's name and mailing address</b> MINNESOTA VALLEY TESTING LABS P.O. BOX 249 NEW ULM MN 56073-0249  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,914.17
3.233.	<b>Nonpriority creditor's name and mailing address</b> MITEX TRADING LLC 195 PLAINFIELD AVE JERSEY CITY NJ 07306  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$800.00
3.234.	<b>Nonpriority creditor's name and mailing address</b> MODA SYSTEMS AMERICA 9615 E COUNTY LINE RD CENTENNIAL CO 80112  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$21,807.97

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3.235.	<b>Nonpriority creditor's name and mailing address</b> MONONA COUNTY IRON INC. 105 SIOUX ST MAPLETON IA 51034  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$65,230.00
3.236.	<b>Nonpriority creditor's name and mailing address</b> MOSS & BARNETT 4800 WELLS FARGO CENTER MINNEAPOLIS MN 55402-4129  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,184.50
3.237.	<b>Nonpriority creditor's name and mailing address</b> MOTION INDUSTRIES 1605 ALTON ROAD BIRMINGHAM AL 35210  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$94,485.51

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3.238.	<b>Nonpriority creditor's name and mailing address</b> MSC INDUSTRIAL SUPPLY 515 BROADHOLLOW ROAD MELVILLE NY 11747  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$20,428.16
3.239.	<b>Nonpriority creditor's name and mailing address</b> MTN LAKE MUNICIPAL UTILITIES 930 THIRD AVENUE MT. LAKE MN 56159  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,870.01
3.240.	<b>Nonpriority creditor's name and mailing address</b> MUNOZ CANALES, JERSSON Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 8/26/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,278.02

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3.241.	<b>Nonpriority creditor's name and mailing address</b> NAC MECHANICAL & ELECTRICAL SERVICES 1001 LABORE INDUSTRIAL CT B ST PAUL MN 55110  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$9,290.00
3.242.	<b>Nonpriority creditor's name and mailing address</b> NALCO WATER 1601 WEST DIEHL ROAD NAPERVILLE IL 60563-1198  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,321.04
3.243.	<b>Nonpriority creditor's name and mailing address</b> NATIONAL PORK PRODUCERS COUNCIL PO BOX 10383 DES MOINES IA 50306  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$0.00

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3.244.	<b>Nonpriority creditor's name and mailing address</b> NAVITOR 1030 MASSACHUSETTS AVENUE CAMBRIDGE MA 02138  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$369.56
3.245.	<b>Nonpriority creditor's name and mailing address</b> NEOGEN CORPORATION 9490 NEOGENOMICS WAY FORT MYERS FL 33912  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,173.78
3.246.	<b>Nonpriority creditor's name and mailing address</b> NEW VISION COOP 38438 210TH STREET BREWSTER MN 56119  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,054.98

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3.247.	<b>Nonpriority creditor's name and mailing address</b> NEWARK CORPORATION 300 SOUTH RIVERSIDE PLAZA CHICAGO IL 60606  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$423.30
3.248.	<b>Nonpriority creditor's name and mailing address</b> NIJHUIS WATER TECHNOLOGY INC. INNOVATIEWEG 4 DOETINCHEM 7007 CD NETHERLANDS  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$25,652.41
3.249.	<b>Nonpriority creditor's name and mailing address</b> NOR-AM COLD STORAGE 801 6TH ST SOUTHWEST LEMARS IA 51031  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,519.99

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3.250.	<b>Nonpriority creditor's name and mailing address</b> NOR-AM COLD STORAGE 801 6TH STREET SOUTHWEST LEMARS IA 51031  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,084.15
3.251.	<b>Nonpriority creditor's name and mailing address</b> NORTH STAR SCALE INC 1006 230TH STREET ORMSBY MN 56162  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,737.87
3.252.	<b>Nonpriority creditor's name and mailing address</b> NUWAY COOPERATIVE 440 HIGHWAY 4 SOUTH TRIMONT MN 56176  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,483.18

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3.253.	<b>Nonpriority creditor's name and mailing address</b> O'REILLY AUTOMOTIVE INC 233 SOUTH PATTERSON AVENUE SPRINGFIELD MO 65802-2298  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10.84
3.254.	<b>Nonpriority creditor's name and mailing address</b> OCEAN NETWORK EXPRESS PTE LTD 8730 STONY POINT PARKWAY RICHMOND VA 23235  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,057.35
3.255.	<b>Nonpriority creditor's name and mailing address</b> OMAR TINAJERO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED

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3.256.	<b>Nonpriority creditor's name and mailing address</b> ORION EQUIPMENT INC 18060 DES MOINES MEMORIAL DRIVE SEATTLE WA 98148  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$401.73
3.257.	<b>Nonpriority creditor's name and mailing address</b> OROZCO GUSAN, HUGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 1/13/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,283.00
3.258.	<b>Nonpriority creditor's name and mailing address</b> ORTIZ LOPEZ, JUAN G Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 3/14/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,444.00

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3.259.	<b>Nonpriority creditor's name and mailing address</b> OTIMO CUSTOMS 366 WATERLOO ST WINNIPEG MB R3N 0S6 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,986.03
3.260.	<b>Nonpriority creditor's name and mailing address</b> OVERHEAD DOOR COMPANY OF MANKATO INC 1430 3RD AVENUE MANKATO MN 56001  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$13,856.25
3.261.	<b>Nonpriority creditor's name and mailing address</b> PARADIS' INC 812 STATE HWY 92 BROOKS MN 56715  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$72,700.00

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3.262.	<b>Nonpriority creditor's name and mailing address</b> PARGA VIRAMONTES, SERGIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/27/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,783.00
3.263.	<b>Nonpriority creditor's name and mailing address</b> PARGA VIRMONTES, SERGIO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/9/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$717.55
3.264.	<b>Nonpriority creditor's name and mailing address</b> PAULSON, MATTHEW Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/15/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$638.67

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3.265.	<b>Nonpriority creditor's name and mailing address</b> PAZ-ECHEVERRIA, JOSE Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$63,735.11
	<b>Date or dates debt was incurred</b> 4/20/2022	<b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.266.	<b>Nonpriority creditor's name and mailing address</b> PCC LOGISTICS 432 ESTUDILLO AVENUE SAN LEANDRO CA 94577	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$11,801.25
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.267.	<b>Nonpriority creditor's name and mailing address</b> PEARSON PACKAGING SYSTEMS 8120 WEST SUNSET HIGHWAY SPOKANE WA 99224	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$1,277.18
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.268.	<b>Nonpriority creditor's name and mailing address</b> PEDERSON, DAINTRI Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$840.00
3.269.	<b>Nonpriority creditor's name and mailing address</b> PER MAR SECURITY SERVICES 1910 EAST KIMBERLY ROAD DAVENPORT IA 52807-2033  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,368.47
3.270.	<b>Nonpriority creditor's name and mailing address</b> PEREZ GARCIA, DINORA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/7/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,570.48

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3.271.	<b>Nonpriority creditor's name and mailing address</b> PETERSON PHARMACY & GIFTS 1007 3RD AVE MT LAKE WINDOM MN 56159  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$570.13
3.272.	<b>Nonpriority creditor's name and mailing address</b> PICK HEATERS INC 730 S INDIANA AVE WEST BEND WI 53095  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$19,796.43
3.273.	<b>Nonpriority creditor's name and mailing address</b> PIERRE, VANIK Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 9/16/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$26,766.91

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3.274.	<b>Nonpriority creditor's name and mailing address</b> PINNACLE ENGINEERING 7660 WOODWAY DRIVE HOUSTON TX 77063  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,900.00
3.275.	<b>Nonpriority creditor's name and mailing address</b> PLAZA RUIZ, FLAVIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 9/29/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11,648.12
3.276.	<b>Nonpriority creditor's name and mailing address</b> PLUNKETT'S PEST CONTROL, INC 40 52ND WAY NE FRIDLEY MN 55421  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,671.84

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3.277.	<b>Nonpriority creditor's name and mailing address</b> PM REPAIR LLC 900 E DEYOUNG ST MARION IL 62959  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,269.77
3.278.	<b>Nonpriority creditor's name and mailing address</b> PORTES DE SOTUYO, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/20/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$45,287.07
3.279.	<b>Nonpriority creditor's name and mailing address</b> PRIMEDGE INC 1281 ARTHUR AVENUE ELK GROVE VILLAGE IL 60007  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,528.13

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3.280.	<b>Nonpriority creditor's name and mailing address</b> PROFESSIONALWATER TECHNOLOGIES 1048 LA MIRADA COURT VISTA CA 92081  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,500.00
3.281.	<b>Nonpriority creditor's name and mailing address</b> QC SUPPLY LLC 574 ROAD 11 SCHUYLER NE 68661-0581  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,900.14
3.282.	<b>Nonpriority creditor's name and mailing address</b> QUICK PRINT 309-311 LONDON ROAD WESTCLIFF-ON-SEA SS0 7BX UNITED KINGDOM  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,372.45

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3.283.	<b>Nonpriority creditor's name and mailing address</b> QVEST LLC 205 SE 2ND ST GUYMON OK 73942	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$188,280.00
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.284.	<b>Nonpriority creditor's name and mailing address</b> QVORTEX LLC 205 SE 2ND STREET GUYMON OK 73942	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$4,103.83
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.285.	<b>Nonpriority creditor's name and mailing address</b> RADIANT ROAD & RAIL, INC. 9014 HERITAGE PKWY WOODBRIDGE IL 60517	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$10,800.00
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.286.	<b>Nonpriority creditor's name and mailing address</b> RAMOS, MAE-LING Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 7/29/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,363.90
3.287.	<b>Nonpriority creditor's name and mailing address</b> RANGOU, SAMYA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 7/1/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,180.38
3.288.	<b>Nonpriority creditor's name and mailing address</b> RASMUSSEN MECHANICAL SERVICES INC 3211 NEBRASKA AVE COUNCIL BLUFFS IA 51501  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,614.32

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3.289.	<b>Nonpriority creditor's name and mailing address</b> RAZOR EDGE SYSTEMS 303 N 17TH AVE E ELY MN 55731  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$861.59
3.290.	<b>Nonpriority creditor's name and mailing address</b> READING BUS LINE INC 19771 MCCALL AVE READING MN 56165  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$14,375.00
3.291.	<b>Nonpriority creditor's name and mailing address</b> RED CARPET INN 1289 EAST DUBLIN GRANVILLE ROAD COLUMBUS OH 43229  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$263.70

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3.292.	<b>Nonpriority creditor's name and mailing address</b> RESHARP INDUSTRIES INC 3315 SW 13TH ST OCALA FL 34474  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,678.06
3.293.	<b>Nonpriority creditor's name and mailing address</b> RGS-CW OF PUERTO RICO INC.  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,539.80
3.294.	<b>Nonpriority creditor's name and mailing address</b> RIOS LORENZANA, JOEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 8/2/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,132.84

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3.295.	<b>Nonpriority creditor's name and mailing address</b> RIOS, VERONICA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/22/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$85.55
3.296.	<b>Nonpriority creditor's name and mailing address</b> RIVERA BAEZ, EDWIN Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 9/13/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$87,465.58
3.297.	<b>Nonpriority creditor's name and mailing address</b> RIVERA COLON, ALFRED Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/17/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$18.82

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3.298.	<b>Nonpriority creditor's name and mailing address</b> ROBERT W. CARLSTROM CO. INC KEITH HAFF 1901 EXCEL DR MANKATO MN 56001-6281  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$539,820.40
3.299.	<b>Nonpriority creditor's name and mailing address</b> ROCHA, URBANO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 10/29/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$898.19
3.300.	<b>Nonpriority creditor's name and mailing address</b> RODRIGUEZ CORTES, LUCAS Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 2/2/2023  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$8,774.37

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3.301.	<b>Nonpriority creditor's name and mailing address</b> RODRIGUEZ GABRIOLA, MARIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 10/4/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,979.49
3.302.	<b>Nonpriority creditor's name and mailing address</b> RODRIGUEZ ROMERO, ROSA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 6/10/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$642.86
3.303.	<b>Nonpriority creditor's name and mailing address</b> RODRIGUEZ SANCHEZ, MA CARMEN Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/18/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,018.37

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3.304.	<b>Nonpriority creditor's name and mailing address</b> RODRIGUEZ SANTIAGO, DOMINGO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 10/6/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$36.05
3.305.	<b>Nonpriority creditor's name and mailing address</b> ROJAS TREJO, CESAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/5/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$6,341.33
3.306.	<b>Nonpriority creditor's name and mailing address</b> ROLLING HILLS EXPRESS INC 275 WAKE FOREST RD SARDIS TN 38371  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$35,910.00

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3.307.	<b>Nonpriority creditor's name and mailing address</b> ROSARIO TORRES, ANGEL Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 6/2/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$32,285.63
3.308.	<b>Nonpriority creditor's name and mailing address</b> ROSENSTENGEL 30968 CO RD 24 SLEEPY EYE MN 56085  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,130.00
3.309.	<b>Nonpriority creditor's name and mailing address</b> RUNNING SUPPLY INC - 72190 901 NORTH HIGHWAY 59 MARSHALL MN 56258  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$556.18

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3.310.	<b>Nonpriority creditor's name and mailing address</b> SAFE FOODS CHEMICAL INNOVATIONS 1501 E 8TH ST NORTH LITTLE ROCK AR 72114  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$20,823.10
3.311.	<b>Nonpriority creditor's name and mailing address</b> SANCHEZ, FRANCISCO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED
3.312.	<b>Nonpriority creditor's name and mailing address</b> SANFORD HEALTH 6101 S LOUISE AVE SIOUX FALLS SD 57108  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,124.00

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3.313.	<b>Nonpriority creditor's name and mailing address</b> SANFORD HEALTH OCCUPATIONAL MC 1305 WEST 18TH STREET SIOUX FALLS SD 57117-5039  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,135.00
3.314.	<b>Nonpriority creditor's name and mailing address</b> SANITOS GOMEZ, YANET Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 5/2/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$30.85
3.315.	<b>Nonpriority creditor's name and mailing address</b> SATELLITE SHELTERS INC. 2530 XENIUM LANE NORTH PLYMOUTH MN 55441  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$16,031.30

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3.316.	<b>Nonpriority creditor's name and mailing address</b> SCHIMBERG COMPANY 1106 SHAVER RD NE CEDAR RAPIDS IA 52402-4500  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$723.70
3.317.	<b>Nonpriority creditor's name and mailing address</b> SCHWALBACH HARDWARE INC 193 9TH ST WINDOM MN 56101-1770  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$9,199.98
3.318.	<b>Nonpriority creditor's name and mailing address</b> SCHWARTZ FARMS 32296 190TH STREET SLEEPY EYE MN 56085-9652  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$58,013.00

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3.319.	<b>Nonpriority creditor's name and mailing address</b> SCHWICKERT'S TECTA AMERICA LLC 221 MINNESOTA STREET MANKATO MN 56001-2332  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,179.93
3.320.	<b>Nonpriority creditor's name and mailing address</b> SCOTLYNN 1150 VITTORIA ROAD VITTORIA ON N0E1W0 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$60,084.59
3.321.	<b>Nonpriority creditor's name and mailing address</b> SCR SOLUTIONS, INV. 1007 N TOWER RD FERGUS FALLS MN 56537  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$4,795.00

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3.322.	<b>Nonpriority creditor's name and mailing address</b> SEALED AIR 2415 CASCADE POINTE BOULEVARD CHARLOTTE NC 28208  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$21,396.79
3.323.	<b>Nonpriority creditor's name and mailing address</b> SEIGFREID BINGHAM 2800 COMMERCE TOWER KANSAS CITY MO 64105  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$16,464.00
3.324.	<b>Nonpriority creditor's name and mailing address</b> SHERWOOD FOOD DISTRIBUTORS 12499 EVERGREEN ROAD DETROIT MI 48228  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$54,842.68

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3.325.	<b>Nonpriority creditor's name and mailing address</b> SHORR - HANCHETT PAPER COMPANY 4000 FERRY ROAD AURORA IL 60502  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$18,300.96
3.326.	<b>Nonpriority creditor's name and mailing address</b> SIERRA PATINO, ALBERTO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 10/14/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$195.88
3.327.	<b>Nonpriority creditor's name and mailing address</b> SIGMA-ALDRICH PO BOX 14508 ST LOUIS MO 68187  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,021.49

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3.328.	<b>Nonpriority creditor's name and mailing address</b> SILCHUK LOGISTICS 1708 E RICE ST SIOUX FALLS SD 57101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$0.00
3.329.	<b>Nonpriority creditor's name and mailing address</b> SILVA-COFRESI, MANZANO & PADRO 9615 LOS ROMEROS AVE. SAN JUAN PR 00926-7059  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$40.00
3.330.	<b>Nonpriority creditor's name and mailing address</b> SKYLINE INTL 5 FABAS STREET BOX 100 LA BROQUERIE MB R0A 0W0 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> INTERCOMPANY ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$582,709.00

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3.331.	<b>Nonpriority creditor's name and mailing address</b> SMITH TRUCKING 701 MARKET ST STE 111 SAINT AUGUSTINE FL 32095-8803  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11,812.00
3.332.	<b>Nonpriority creditor's name and mailing address</b> SOS OFFICE FURNITURE 2441 UNIVERSITY AVENUE WEST ST. PAUL MN 55114  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$44.67
3.333.	<b>Nonpriority creditor's name and mailing address</b> SOUTH CENTRAL ELECTRIC ASSOCIATION 71176 TIELL DRIVE SAINT JAMES MN 56081  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$199.54

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3.334.	<b>Nonpriority creditor's name and mailing address</b> SPRAYING SYSTEMS CO 200 WEST NORTH AVENUE GLENDALE HEIGHTS IL 60187-7901  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,096.50
3.335.	<b>Nonpriority creditor's name and mailing address</b> SPRING HILL PALLET INC. 164 SEVEN PINES CUT-OFF LONGVIEW TX 75605  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$259,308.00
3.336.	<b>Nonpriority creditor's name and mailing address</b> STAPLES ADVANTAGE 500 STAPLES DRIVE FRAMINGHAM MA 01702  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$20,398.05

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3.337.	<b>Nonpriority creditor's name and mailing address</b> STAPLES OIL CO. 1680 REDDING AVE N WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,086.94
3.338.	<b>Nonpriority creditor's name and mailing address</b> STAR EQUIPMENT INC 1401 2ND AVENUE DES MOINES IA 50314  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$995.00
3.339.	<b>Nonpriority creditor's name and mailing address</b> STEAM LOGISTICS NICHOLAS THOMPSON 325 MARKET ST CHATTANOOGA TN 37402  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$137,993.70

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3.340.	<b>Nonpriority creditor's name and mailing address</b> STEARNSMARTIN LLC 1255 HWY 15 SOUTH FAIRMONT MN 56031  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$16,000.00
3.341.	<b>Nonpriority creditor's name and mailing address</b> STINSON LEONARD STREET 1201 WALNUT STREET KANSAS CITY MO 64106  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$71,449.89
3.342.	<b>Nonpriority creditor's name and mailing address</b> SUBWAY UNIT 6A INTU MERRY HILL BRIERLEY HILL DY5 1-SY UNITED KINGDOM  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$22.52

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3.343.	<b>Nonpriority creditor's name and mailing address</b> SUMMIT ENVIROSOLUTIONS INC 6774 S MCCARRAN BLVD # 101 RENO NV 89609  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,532.53
3.344.	<b>Nonpriority creditor's name and mailing address</b> SUNBELT RENTALS INC 2341 DEERFIELD DR FORT MILL SC 29715  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$814.16
3.345.	<b>Nonpriority creditor's name and mailing address</b> SVE LLC ONE BOSTON PLACE BOSTON MA 02108  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$12,720.19

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3.346.	<b>Nonpriority creditor's name and mailing address</b> SYSCO WESTERN 900 US-10 ST CLOUD MN 56304  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$896.53
3.347.	<b>Nonpriority creditor's name and mailing address</b> T&M DEVELOPMENT LLC 5905 BELLEVILLE RD BELLEVILLE MI 48111-1119  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$51,015.16
3.348.	<b>Nonpriority creditor's name and mailing address</b> TENNANT SALES AND SERVICE COMPANY 10400 CLEAN STREET EDEN PRAIRIE MN 55344  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,867.26

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3.349.	<b>Nonpriority creditor's name and mailing address</b> THE FIRE GROUP, INC. V DELL UNIONE 3 MILANO 20122 ITALY  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$25,723.77
3.350.	<b>Nonpriority creditor's name and mailing address</b> THERMO RAMSEY INC 501 90TH AVE NW MINNEAPOLIS MN 55111  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,262.70
3.351.	<b>Nonpriority creditor's name and mailing address</b> TINAJERO IBARRA, OMAR Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED

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3.352.	<b>Nonpriority creditor's name and mailing address</b> TINAJERO, OMAR Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$49,959.93
	<b>Date or dates debt was incurred</b> 7/21/2022	<b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.353.	<b>Nonpriority creditor's name and mailing address</b> TORRES MARTINEZ, CECILIA Address Intentionally Omitted	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$35.32
	<b>Date or dates debt was incurred</b> 1/12/2023	<b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.354.	<b>Nonpriority creditor's name and mailing address</b> TOTAL MAINTENANCE SOLUTIONS 507 45TH STREET GARDEN CITY ID 83714	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$5,543.85
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.355.	<b>Nonpriority creditor's name and mailing address</b> TRANSAM TRUCKING INC. 15910 SOUTH HIGHWAY 169 OLATHE KS 66062	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$59,661.58
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.356.	<b>Nonpriority creditor's name and mailing address</b> TRANSPORTATION SPECIALIST, LTD. 10001 SOUTH 152ND STREET OMAHA NE 68138	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$31,490.28
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.357.	<b>Nonpriority creditor's name and mailing address</b> TRAPPERS TRANSPORT LTD 1300 REDONDA STREET WINNIPEG MB R2C 3T7 CANADA	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Amount of claim</b> \$19,100.51
	<b>Date or dates debt was incurred</b> VARIOUS	<b>Basis for the claim:</b> ACCOUNTS PAYABLE	
	<b>Last 4 digits of account number:</b>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.358.	<b>Nonpriority creditor's name and mailing address</b> TRI - MACH GROUP INC 23 DONWAY COURT ELMIRA ON N3B 0B1 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$5,535.00
3.359.	<b>Nonpriority creditor's name and mailing address</b> TRI-CHEM CORPORATION 8154-217, UENOHARA UENOHARA 409-0112 JAPAN  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$13,074.38
3.360.	<b>Nonpriority creditor's name and mailing address</b> TRUJILLO RAMIREZ, AMPARO Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 6/13/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$49,438.09

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3.361.	<b>Nonpriority creditor's name and mailing address</b> U.S. POSTAL SERVICE 475 L'ENFANT PLAZA SW WASHINGTON DC 20260-0546  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,500.00
3.362.	<b>Nonpriority creditor's name and mailing address</b> ULINE INC 12575 ULINE DRIVE PLEASANT PRAIRIE WI 53158  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,339.05
3.363.	<b>Nonpriority creditor's name and mailing address</b> UNION PACIFIC RAILROAD COMPANY 1400 DOUGLAS STREET OMAHA NE 68007  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$21,520.56

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3.364.	<b>Nonpriority creditor's name and mailing address</b> UNITED RENTALS INC 100 FIRST STAMFORD PLACE STAMFORD CT 06902  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$10,691.94
3.365.	<b>Nonpriority creditor's name and mailing address</b> UPS 55 GLENLAKE PARKWAY, N.E. ATLANTA GA 30328  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$8,781.91
3.366.	<b>Nonpriority creditor's name and mailing address</b> UPS SUPPLY CHAIN SOLUTIONS INC. 55 GLENLAKE PARKWAY, NE ATLANTA GA 30328  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$198.09

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3.367.	<b>Nonpriority creditor's name and mailing address</b> VALENZUELA RUGAMA, NUBIA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 11/11/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11.30
3.368.	<b>Nonpriority creditor's name and mailing address</b> VALLEJO, BELINDA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 9/17/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$21,185.58
3.369.	<b>Nonpriority creditor's name and mailing address</b> VAN METER INC 850 32ND AVENUE SW CEDAR RAPIDS IA 52404  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$16,520.02

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3.370.	<b>Nonpriority creditor's name and mailing address</b> VAN TOL PROPERTIES LLC 1050 MARSH STREET MANKATO MN 56001  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,995.00
3.371.	<b>Nonpriority creditor's name and mailing address</b> VANDEBERG SCALES 770 7TH ST NW SIOUX CENTER IA 51250  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,734.66
3.372.	<b>Nonpriority creditor's name and mailing address</b> VET'S OIL COMPANY DBA SUPERAMERICA 814 3RD ST JACKSON MN 56304  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$192.34

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.373.	<b>Nonpriority creditor's name and mailing address</b> VIKING ELECTRIC SUPPLY INC 451 INDUSTRIAL BOULEVARD NE MINNEAPOLIS MN 55413  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,298.78
3.374.	<b>Nonpriority creditor's name and mailing address</b> VOYA FINANCIAL 230 PARK AVENUE NEW YORK NY 10169  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,484.06
3.375.	<b>Nonpriority creditor's name and mailing address</b> WAKEFIELD PORK INC 410 MAIN AVE E GAYLORD MN 55334  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$106,206.11

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.376.	<b>Nonpriority creditor's name and mailing address</b> WELLS FARGO EQUIPMENT FINANCE MANUFACTURER SERVICE GROUP 733 MARQUETTE AVENUE MINNEAPOLIS MN 55402  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11,248.89
3.377.	<b>Nonpriority creditor's name and mailing address</b> WERNER ENTERPRISES INC 14507 FRONTIER ROAD OMAHA NE 68145-0308  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$37,093.30
3.378.	<b>Nonpriority creditor's name and mailing address</b> WESTROCK CP LLC 504 THRASHER STREET NORCROSS GA 30071-1967  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,001,978.98

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3.379.	<b>Nonpriority creditor's name and mailing address</b> WILLIAM SCOTTSMAN INC. 8211 TOWN CENTER DRIVE BALTIMORE MD 21236-6047  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$3,441.25
3.380.	<b>Nonpriority creditor's name and mailing address</b> WILLIAMS, PAUL Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/27/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,283.00
3.381.	<b>Nonpriority creditor's name and mailing address</b> WILLY, ELIZA Address Intentionally Omitted  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> UNDETERMINED

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.382.	<b>Nonpriority creditor's name and mailing address</b> WILSON BROTHERS INC. 925 LAMBRECHT ROAD FRANKFORT IL 60423  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$2,220.00
3.383.	<b>Nonpriority creditor's name and mailing address</b> WINDOM FIRE & SAFETY 680 DES MOINES DR WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,624.91
3.384.	<b>Nonpriority creditor's name and mailing address</b> WINDOM TOWING LLC 2470 MN-60 WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$8,152.51

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.385.	<b>Nonpriority creditor's name and mailing address</b> WINDOM WASH LLC 2610 HIGHWAY 60 EAST WINDOM MN 56101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,003.64
3.386.	<b>Nonpriority creditor's name and mailing address</b> WW COMMUNICATIONS AND SECURITY SPECIALISTS 53936 208TH LN #2 MANKATO MN 56001  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$144.96
3.387.	<b>Nonpriority creditor's name and mailing address</b> XCEL ENERGY 414 NICOLLET MALL MINNEAPOLIS MN 55401  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$11,278.73

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

3.388.	<b>Nonpriority creditor's name and mailing address</b> XPO LOGISTICS FIVE AMERICAN LANE GREENWICH CT 06831  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> ACCOUNTS PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$1,227.63
3.389.	<b>Nonpriority creditor's name and mailing address</b> ZAMORA LULE, JESUS Address Intentionally Omitted  <b>Date or dates debt was incurred</b> 12/20/2022  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PENDING WORKERS' COMPENSATION CLAIM  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Amount of claim</b> \$42,061.10

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
ASHBY & GEDDES P.A. GREGORY A TAYLOR; BENJAMIN W KEENAN 500 DELAWARE AVENUE, 8TH FLOOR P O BOX 1150 WILMINGTON DE 19801	Part 2 line 3.298	
BASSFORD REMELE P.A. JEFFREY D KLOBUCAR; CAMERON A LALLIER 100 SOUTH 5TH STREET STE 1500 MINNEAPOLIS MN 55402-1254	Part 2 line 3.298	
BUCHANAN INGERSOLL & ROONEY PC GEOFFREY G GRIVNER, ESQ 500 DELAWARE AVE., STE 720 WILMINGTON DE 19801	Part 2 line 3.59	
BUCHANAN INGERSOLL & ROONEY PC PETER S RUSS, ESQ 501 GRANT ST., STE 200 PITTSBURGH PA 15219	Part 2 line 3.59	
CENTRALIZED INSOLVENCY OPERATION PO BOX 7346 PHILADELPHIA PA 19101-7346	Part 1 line 2.920	
CENTRALIZED INSOLVENCY OPERATION 2970 MARKET ST MAIL STOP 5 Q30 133 PHILADELPHIA PA 19104-5016	Part 1 line 2.920	
COTTONWOOD COUNTY AUDITOR/TREASURER GALE BONDHUS 900 3RD AVE WINDOM MN 56101	Part 2 line 3.76	
KOHNER MANN & KAILAS S.C. SAMUEL C WISOTZKEY WASHINGTON BUILDING BARNABAS BUSINESS CENTER 4650 NORTH PORT WASHINGTON RD MILWAUKEE WI 53212-1059	Part 2 line 3.94	
PAUL HASTINGS LLP FRANK MEROLA 1999 AVENUE OF THE STARS 27TH FL CENTURY CITY CA 90067	Part 2 line 3.330	
PAUL HASTINGS LLP FRANK MEROLA 1999 AVENUE OF THE STARS 27TH FL CENTURY CITY CA 90067	Part 2 line 3.159	
PAUL HASTINGS LLP FRANK MEROLA 1999 AVENUE OF THE STARS 27TH FL CENTURY CITY CA 90067	Part 2 line 3.158	

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

PAUL HASTINGS LLP  
FRANK MEROLA  
1999 AVENUE OF THE STARS  
27TH FL  
CENTURY CITY CA 90067

Part 2 line 3.157

PAUL HASTINGS LLP  
JASON PIERCE  
4747 EXECUTIVE DR  
12TH FL  
SAN DIEGO CA 92121

Part 2 line 3.330

PAUL HASTINGS LLP  
JASON PIERCE  
4747 EXECUTIVE DR  
12TH FL  
SAN DIEGO CA 92121

Part 2 line 3.159

PAUL HASTINGS LLP  
JASON PIERCE  
4747 EXECUTIVE DR  
12TH FL  
SAN DIEGO CA 92121

Part 2 line 3.158

PAUL HASTINGS LLP  
JASON PIERCE  
4747 EXECUTIVE DR  
12TH FL  
SAN DIEGO CA 92121

Part 2 line 3.157

PAUL HASTINGS LLP  
JAYME GOLDSTEIN  
200 PARK AVE  
NEW YORK NY 10166

Part 2 line 3.330

PAUL HASTINGS LLP  
JAYME GOLDSTEIN  
200 PARK AVE  
NEW YORK NY 10166

Part 2 line 3.159

PAUL HASTINGS LLP  
JAYME GOLDSTEIN  
200 PARK AVE  
NEW YORK NY 10166

Part 2 line 3.158

PAUL HASTINGS LLP  
JAYME GOLDSTEIN  
200 PARK AVE  
NEW YORK NY 10166

Part 2 line 3.157

SULLIVAN HAZELTINE ALLINSON LLC  
WILLIAM A HAZELTINE,ESQ  
919 NORTH MARKET ST.,STE 420  
WILMINGTON DE 19801

Part 2 line 3.349

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521****Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

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**5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts****5a. Total claims from Part 1** 5a. UNDETERMINED**5b. Total claims from Part 2** 5b. + \$15,173,784.89**5c. Total of Parts 1 and 2** 5c. \$15,173,784.89  
Lines 5a + 5b = 5c.

**Fill in this information to identify the case:****Debtor name:** HyLife Foods Windom, LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 23-10521☐ Check if this is an amended filingOfficial Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2.	List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.1.	<b>Title of contract</b> SERVICE AGREEMENT <b>State what the contract or lease is for</b> MICRO-MARKET SERVICES <b>Nature of debtor's interest</b> CONTRACT PARTY <b>State the term remaining</b> 3/1/2023 <b>List the contract number of any government contract</b> _____	A.H. HERMEL CO. 23099 NORTH RIVERFRONT DRIVE MANKATO MN 56001
2.2.	<b>Title of contract</b> TRUST <b>State what the contract or lease is for</b> TRUST AGREEMENT <b>Nature of debtor's interest</b> CONTRACT PARTY <b>State the term remaining</b> _____ <b>List the contract number of any government contract</b> _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease AGRICULTURE MARKETING AND DEVELOPMENT, MINNESOTA DEPARTMENT OF AGRICULTURE 625 ROBERT STREET NORTH SAINT PAUL MN 55155
2.3.	<b>Title of contract</b> SUPPLY AGREEMENT <b>State what the contract or lease is for</b> HOG SUPPLY AGREEMENT <b>Nature of debtor's interest</b> CONTRACT PARTY <b>State the term remaining</b> 3Y TERM EXPIRED <b>List the contract number of any government contract</b> _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease AGRI-SWINE ALLIANCE 4745 RAILROAD AVE SE ABERDEEN SD 57401

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.4. **Title of contract** BUSINESS INSURANCE POLICY  
**State what the contract or lease is for** DIRECTORS & OFFICERS LIABILITY POLICY NO. 06-078-93-37  
**Nature of debtor's interest** INSURED  
**State the term remaining** 12/29/2023  
**List the contract number of any government contract** \_\_\_\_\_  
**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
AIG INSURANCE COMPANY OF CANADA  
120 BREMNER BOULEVARD  
SUITE 2200  
TORONTO ON M5J 0A8  
CANADA
- 2.5. **Title of contract** INSURANCE AGREEMENT  
**State what the contract or lease is for** EXCESS DIRECTORS & OFFICERS LIABILITY INSURANCE NO. 0313-7727  
**Nature of debtor's interest** \_\_\_\_\_  
**State the term remaining** \_\_\_\_\_  
**List the contract number of any government contract** \_\_\_\_\_  
**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
ALLIED WORLD SPECIALTY INSURANCE COMPANY  
200 KING STREET WEST  
SUITE 1600  
TORONTO ON M5H3T4  
CANADA
- 2.6. **Title of contract** SUPPLY AGREEMENT  
**State what the contract or lease is for** PACKAGING SUPPLY  
**Nature of debtor's interest** CONTRACT PARTY  
**State the term remaining** 12/31/2025  
**List the contract number of any government contract** \_\_\_\_\_  
**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
AMCOR FLEXIBLES NORTH AMERICA, INC.  
2200 BADGER AVENUE  
OSHKOSH WI 54904
- 2.7. **Title of contract** SERVICE AGREEMENT  
**State what the contract or lease is for** COMMUNICATIONS  
**Nature of debtor's interest** CONTRACT PARTY  
**State the term remaining** \_\_\_\_\_  
**List the contract number of any government contract** \_\_\_\_\_  
**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
ASL INTERPRETATION SERVICES, INC.  
5801 DULUTH STREET SUITE 106  
GOLDEN VALLEY MN 55422
- 2.8. **Title of contract** SERVICE AGREEMENT  
**State what the contract or lease is for** CONSTRUCTION  
**Nature of debtor's interest** CONTRACT PARTY  
**State the term remaining** 3/1/2023  
**List the contract number of any government contract** \_\_\_\_\_  
**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
BACKCOUNTRY SERVICES, LLC.  
69751 – 380TH ST  
SAINT JAMES MN 56081

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.9. **Title of contract** BUSINESS INSURANCE POLICY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** DIRECTORS & OFFICERS LIABILITY (EXCESS) POLICY NO. 43-EMC-319574-02
- Nature of debtor's interest** INSURED **BERKSHIRE HATHAWAY SPECIALTY INSURANCE**
- State the term remaining** 12/29/2023 **1 LINCOLN STREET**
- List the contract number of any government contract** \_\_\_\_\_ **23RD FLOOR**
- \_\_\_\_\_ **BOSTON MA '02111**
- 2.10. **Title of contract** \_\_\_\_\_ **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CONTRACTOR
- Nature of debtor's interest** CONTRACT PARTY **CENTIMARK CORPORATION**
- State the term remaining** \_\_\_\_\_ **10701 HAMPSIRE AVE**
- List the contract number of any government contract** \_\_\_\_\_ **BLOOMINGTON MN 55438**
- 2.11. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CONTRACTOR
- Nature of debtor's interest** CONTRACT PARTY **CENTIMARK CORPORATION**
- State the term remaining** WITHIN 10 DAYS OF COMMENCEMENT **10701 HAMPSIRE AVE**
- List the contract number of any government contract** \_\_\_\_\_ **BLOOMINGTON MN 55438**
- 2.12. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CONTRACTOR
- Nature of debtor's interest** CONTRACT PARTY **CENTIMARK CORPORATION**
- State the term remaining** UPON RECIEPT OF MATERIALS **10701 HAMPSIRE AVE**
- List the contract number of any government contract** \_\_\_\_\_ **BLOOMINGTON MN 55438**
- 2.13. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** RAW RENDERING MATERIAL PROCESSING AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY **CENTRAL BI PRODUCTS**
- State the term remaining** \_\_\_\_\_ **220 PONDEROSA ROAD**
- List the contract number of any government contract** \_\_\_\_\_ **PO BOX 319**
- \_\_\_\_\_ **REDWOOD FALLS MN 56283**

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.14. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** RENTAL AGREEMENT
- Nature of debtor's interest** LESSEE **CHEP CANADA CORP**
- State the term remaining** \_\_\_\_\_ **7400 EAST DANBRO CRECENT**
- List the contract number of any government contract** \_\_\_\_\_ **MISSISSAUGA ON L5N 8C6**
- CANADA**
- 2.15. **Title of contract** WASTEWATER TREATMENT AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** \_\_\_\_\_
- Nature of debtor's interest** CONTRACT PARTY **CITY OF WINDOM**
- State the term remaining** AS OF 10/16/2018 **400 DRAKE AVE S**
- List the contract number of any government contract** \_\_\_\_\_ **WINDOM MN 50101**
- 2.16. **Title of contract** WASTEWATER TREATMENT AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** RATE AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY **CITY OF WINDOM**
- State the term remaining** AS OF 12/15/2021 **400 DRAKE AVE S**
- List the contract number of any government contract** \_\_\_\_\_ **WINDOM MN 50101**
- 2.17. **Title of contract** \_\_\_\_\_ **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** \_\_\_\_\_
- Nature of debtor's interest** \_\_\_\_\_ **COMPEER FINANCIAL**
- State the term remaining** \_\_\_\_\_ **1921 PREMIER DR**
- List the contract number of any government contract** \_\_\_\_\_ **MANKATO MN 56001**
- 2.18. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** EQUIPMENT LEASE
- Nature of debtor's interest** LESSEE **COMPEER FINANCIAL**
- State the term remaining** 7/31/2027 **2600 JENNY WREN TRAIL**
- List the contract number of any government contract** \_\_\_\_\_ **PO BOX 810**
- SUN PRAIRIE WI 53590**

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.19. **Title of contract** CONTRACT
- State what the contract or lease is for** CONFIDENTIAL CUSTOMER CONTRACTS
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
CONFIDENTIAL CUSTOMER CONTRACTS
- 
- 2.20. **Title of contract** LABOR AGREEMENT
- State what the contract or lease is for** SECONDMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** 2025
- List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
CONSTANTINO,WILFREDO  
Address Intentionally Omitted
- 
- 2.21. **Title of contract** BUSINESS INSURANCE POLICY
- State what the contract or lease is for** COMMERCIAL OUTPUT PROPERTY POLICY NO. COP145532A
- Nature of debtor's interest** INSURED
- State the term remaining** 1/1/2024
- List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
CRESTBROOK INSURANCE COMPANY  
NATIONWIDE MUTUAL INSURANCE COMPANY  
1 NATIONWIDE PLAZA  
COLUMBUS OH 43215
- 
- 2.22. **Title of contract** BUSINESS INSURANCE POLICY
- State what the contract or lease is for** COMMERCIAL GENERAL LIABILITY POLICY NO. CPP145532A
- Nature of debtor's interest** INSURED
- State the term remaining** 1/1/2024
- List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
CRESTBROOK INSURANCE COMPANY  
NATIONWIDE MUTUAL INSURANCE COMPANY  
1 NATIONWIDE PLAZA  
COLUMBUS OH 43215
- 
- 2.23. **Title of contract** BUSINESS INSURANCE POLICY
- State what the contract or lease is for** COMMERCIAL AUTOMOBILE LIABILITY POLICY NO. CPP145532A
- Nature of debtor's interest** INSURED
- State the term remaining** 1/1/2024
- List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
CRESTBROOK INSURANCE COMPANY  
NATIONWIDE MUTUAL INSURANCE COMPANY  
1 NATIONWIDE PLAZA  
COLUMBUS OH 43215

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.24. **Title of contract** BUSINESS INSURANCE POLICY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** UMBRELLA LIABILITY POLICY NO. CU145532A
- Nature of debtor's interest** INSURED CRESTBROOK INSURANCE COMPANY  
NATIONWIDE MUTUAL INSURANCE COMPANY  
1 NATIONWIDE PLAZA  
COLUMBUS OH 43215
- State the term remaining** 1/1/2024
- List the contract number of any government contract** \_\_\_\_\_
- 2.25. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** FORKLIFT LEASE
- Nature of debtor's interest** LESSEE CROWN LIFT TRUCKS  
8650 109TH AVE N  
CHAMPLIN MN 55316
- State the term remaining** 6/15/2024
- List the contract number of any government contract** \_\_\_\_\_
- 2.26. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CHARGER
- Nature of debtor's interest** CONTRACT PARTY CROWN LIFT TRUCKS  
8650 109TH AVE N  
CHAMPLIN MN 55316
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.27. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CONSULTING SERVICES
- Nature of debtor's interest** CONTRACT PARTY DC LEGISLATIVE & REGULATORY SERVICES, INC.  
2221 S. CLARK STREET 11TH FLOOR  
ARLINGTON VA 22202
- State the term remaining** 4/1/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.28. **Title of contract** LABOR AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SECONDMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY DE SOLA, ROMAR  
Address Intentionally Omitted
- State the term remaining** 7/17/1905
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.29. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** DENTAL INSURANCE
- Nature of debtor's interest** CONTRACT PARTY DELTA DENTAL OF MINNESOTA  
P.O. BOX 9124  
FARMINGTON HILLS MI 48333
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.30. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** WATER TREATMENT
- Nature of debtor's interest** CONTRACT PARTY ECOLAB CO  
5150 TOMKEN RAOD  
MISSISSAUGA ON L4W 2X5  
CANADA
- State the term remaining** 7/1/2026
- List the contract number of any government contract** \_\_\_\_\_
- 2.31. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY LEASE
- Nature of debtor's interest** LESSEE ECONOMIC DEVELOPMENT  
AUTHORITY OF WINDOM  
1925 NORTH REDDING AVENUE  
WINDOM MN 56101
- State the term remaining** 4/30/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.32. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** 401K PLAN
- Nature of debtor's interest** CONTRACT PARTY EMPOWER RETIREMENT  
PO BOX 1700  
DENVER CO 80201
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.33. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ENERGY SERVICES
- Nature of debtor's interest** CONTRACT PARTY ENCORE ENERGY SERVICES, INC.  
11807 Q STREET  
SUITE 1  
OMAHA NE 68107
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.34. **Title of contract** SUPPLY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HOG SUPPLY AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY FAST DEVELOPMENT, INC.  
1751 623RD AVENUE  
PEMBERTON MN 56078
- State the term remaining** 2Y TERM EXPIRED
- List the contract number of any government contract** \_\_\_\_\_
- 2.35. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** MECHANICAL
- Nature of debtor's interest** CONTRACT PARTY FEDER MECHANICAL  
320 ADAMS AVE NE  
PO BOX 249  
MADELIA MN 56062
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.36. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** MECHANICAL
- Nature of debtor's interest** CONTRACT PARTY FEDER MECHANICAL  
320 ADAMS AVE NE  
PO BOX 249  
MADELIA MN 56062
- State the term remaining** 1/21/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.37. **Title of contract** LEGAL SERVICES **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ENGAGEMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY FITCH JOHNSON LARSON, P.A.  
WILLIAM WARREN  
2355 HIGHWAY 36 WEST  
SUITE 300  
ROSEVILLE MN 55113
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.38. **Title of contract** LEGAL SERVICES **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ENGAGEMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY FREDRIKSON & BYRON, P.A.  
RANDY ZELLMER  
111 S. SECOND STREET  
SUITE 400  
MANKATO MN 56001
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- |       |   |  |  |
|-------|---|--|--|
| 2.39. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>TOOL MANUFACTURING<br>CONTRACT PARTY<br>1/1/2023<br><hr/>                       | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>FRONTMATEC EQUIPMENT INC.<br>51 RTE MORISSETTE<br>SAINT-ANSELME QC G0R2N0<br>CANADA |
| 2.40. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>MNPMENT INC 51TRNSELMEPMENT INCTL<br>CONTRACT PARTY<br>UPON COMPLETION<br><hr/> | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>FRONTMATEC EQUIPMENT INC.<br>51 RTE MORISSETTE<br>SAINT-ANSELME QC G0R2N0<br>CANADA |
| 2.41. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | LABOR AGREEMENT<br>SECONDMENT AGREEMENT<br>CONTRACT PARTY<br>7/16/1905<br><hr/>                      | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>GANGADHARAN, SIVADOSS<br>Address Intentionally Omitted                              |
| 2.42. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>REFRIGERATION<br>CONTRACT PARTY<br>9/2/2022<br><hr/>                            | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>GARTNER REFRIGIRATION INC.<br>13205 16TH AVE N<br>PLYMOUTH MN 55441                 |
| 2.43. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>REFRIGERATION<br>CONTRACT PARTY<br>2/21/2023<br><hr/>                           | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>GARTNER REFRIGIRATION INC.<br>13205 16TH AVE N<br>PLYMOUTH MN 55441                 |

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.44. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REFRIGERATION
- Nature of debtor's interest** CONTRACT PARTY GARTNER REFRIGERATION INC.  
13205 16TH AVE N  
PLYMOUTH MN 55441
- State the term remaining** 10/2/2023
- List the contract number of any government contract** \_\_\_\_\_
- 2.45. **Title of contract** SUPPLY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HOG SUPPLY AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY GAT FARMS, LLC  
1725 ROE CREST DRIVE  
NORTH MANKATO MN 56003
- State the term remaining** 1Y TERM EXPIRED
- List the contract number of any government contract** \_\_\_\_\_
- 2.46. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TRANSITION SERVICES AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY GAT FARMS, LLC  
1725 ROE CREST DRIVE  
NORTH MANKATO MN 56003
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.47. **Title of contract** LEGAL SERVICES **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ENGAGEMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY GISLASON & HUNTER LLP  
DAVID KIM  
111 S. SECOND STREET  
SUITE 500  
MANKATO MN 56001
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.48. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY LEASE
- Nature of debtor's interest** LESSEE GLOBAL INVESTMENT PROPERTIES, LLC  
1820 N REDDING AVE  
PO BOX 441  
WINDOM MN 56101
- State the term remaining** 5/1/2025
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

2.49.	<b>Title of contract</b> <b>State what the contract or lease is for</b> <b>Nature of debtor's interest</b> <b>State the term remaining</b> <b>List the contract number of any government contract</b>	LEASE ASSIGNMENT OF COMMERCIAL LEASE LESSEE  	<b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b> GLOBAL INVESTMENT PROPERTIES, LLC 1820 N REDDING AVE PO BOX 441 WINDOM MN 56101
2.50.	<b>Title of contract</b> <b>State what the contract or lease is for</b> <b>Nature of debtor's interest</b> <b>State the term remaining</b> <b>List the contract number of any government contract</b>	LEASE PROPERTY LEASE LESSEE 9/28/2023 	<b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b> GRANITE CITY REAL ESTATE 1685 REDDING AVE N - 203 WINDOM MN 56101
2.51.	<b>Title of contract</b> <b>State what the contract or lease is for</b> <b>Nature of debtor's interest</b> <b>State the term remaining</b> <b>List the contract number of any government contract</b>	LEASE PROPERTY LEASE LESSEE 8/7/2023 	<b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b> GRANITE CITY REAL ESTATE 1685 REDDING AVE N - 312 WINDOM MN 56101
2.52.	<b>Title of contract</b> <b>State what the contract or lease is for</b> <b>Nature of debtor's interest</b> <b>State the term remaining</b> <b>List the contract number of any government contract</b>	LEASE PROPERTY LEASE LESSEE 3/15/2024 	<b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b> GRANITE CITY REAL ESTATE 1685 REDDING AVE N - 207 WINDOM MN 56101
2.53.	<b>Title of contract</b> <b>State what the contract or lease is for</b> <b>Nature of debtor's interest</b> <b>State the term remaining</b> <b>List the contract number of any government contract</b>	LEASE PROPERTY LEASE LESSEE N/A 	<b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b> GRANITE CITY REAL ESTATE 1685 REDDING AVE N - 306 WINDOM MN 56101

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.54. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY LEASE
- Nature of debtor's interest** LESSEE GRANITE CITY REAL ESTATE  
1685 REDDING AVE N - 306  
WINDOM MN 56101
- State the term remaining** 5/23/2023
- List the contract number of any government contract** \_\_\_\_\_
- 2.55. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** EXECUTIVE
- Nature of debtor's interest** CONTRACT PARTY GRC EXECUTIVE LLC  
1353 AV. LUIS VIGOREAUX  
GUAYNABO PR 00966
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.56. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TRANSPORT
- Nature of debtor's interest** CONTRACT PARTY GREAT PLAINS TRANSPORT, INC.  
200 1ST AVE SE  
MAPLETON ND 58059
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.57. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** 401K PLAN
- Nature of debtor's interest** CONTRACT PARTY GREAT WEST TRUST COMPANY  
8515 E. ORCHARD ROAD  
GREENWOOD VILLAGE CO 80111
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.58. **Title of contract** SUPPLY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HOG SUPPLY AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY GREG STROBEL D/B/A STROBEL  
FARMS  
1751 623RD AVENUE  
PEMBERTON MN 56078
- State the term remaining** 2Y TERM EXPIRED
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.59. **Title of contract** SUPPLY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HOG SUPPLY AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY GREG STROBEL FARMS LLC  
1751 623RD AVENUE  
PEMBERTON MN 56078
- State the term remaining** 2Y TERM EXPIRED
- List the contract number of any government contract** \_\_\_\_\_
- 2.60. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY LEASE
- Nature of debtor's interest** LESSEE GUBER, GREG T.  
Address Intentionally Omitted
- State the term remaining** 9/30/2023
- List the contract number of any government contract** \_\_\_\_\_
- 2.61. **Title of contract** LABOR AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SECONDMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY GULICK, TYRONE  
Address Intentionally Omitted
- State the term remaining** 2025
- List the contract number of any government contract** \_\_\_\_\_
- 2.62. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** WATER TREATMENT
- Nature of debtor's interest** CONTRACT PARTY H2O INNOVAITION USA, INC.  
330 RUE SAINT-VALLIER STREET  
EAST  
SUITE 340  
QUEBEC CITY QC G1K9C5  
CANADA
- State the term remaining** 1/10/2023
- List the contract number of any government contract** \_\_\_\_\_
- 2.63. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** WATER TREATMENT
- Nature of debtor's interest** CONTRACT PARTY H2O INNOVAITION USA, INC.  
330 RUE SAINT-VALLIER STREET  
EAST  
SUITE 340  
QUEBEC CITY QC G1K9C5  
CANADA
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.64. **Title of contract** REAL ESTATE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL ESTATE PURCHASE
- Nature of debtor's interest** BORROWER HEINOLD HOG MARKETS, LLC  
2720 HWY 60  
WINDOM MN 56101
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.65. **Title of contract** LABOR AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SECONDMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY HILL, KARLEE  
Address Intentionally Omitted
- State the term remaining** 1Y TERM, EXPIRED
- List the contract number of any government contract** \_\_\_\_\_
- 2.66. **Title of contract** LABOR AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** EXTENSION OF SECONDMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY HILL, KARLEE  
Address Intentionally Omitted
- State the term remaining** 2/15/2024
- List the contract number of any government contract** \_\_\_\_\_
- 2.67. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TRANSPIRATION
- Nature of debtor's interest** CONTRACT PARTY HIRSCHBACH TRANSPORTATION  
SERVICES, INC.  
2460 KERPER BLVD  
DUBQUQUE IA 52003
- State the term remaining** 4/1/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.68. **Title of contract** SUPPLY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** DISTRIBUTION AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY HYLIFE FOODS INTERNATIONAL  
LTD  
L'HORIZON  
GUNSITE ROAD BRITTONS HILL  
ST. MICHAELS 14027  
BARBADOS
- State the term remaining** 3/31/2023
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- |       |   |  |  |
|-------|---|--|--|
| 2.69. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SALE AGREEMENT<br>SALE AND PURCHASE AGREEMENT<br>CONTRACT PARTY<br>10/15/2024<br>_____ | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>HYLIFE FOODS INTERNATIONAL LTD<br>L'HORIZON<br>GUNSITE ROAD BRITTONS HILL<br>ST. MICHAELS 14027<br>BARBADOS |
| 2.70. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SALE AGREEMENT<br>SALE AND PURCHASE AGREEMENT<br>CONTRACT PARTY<br>4/1/2023<br>_____   | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>HYLIFE FOODS INTERNATIONAL LTD<br>GUNSITE ROAD BRITTONS HILL<br>ST. MICHELLE 14027<br>BARBADOS              |
| 2.71. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SALE AGREEMENT<br>SALE AND PURCHASE AGREEMENT<br>CONTRACT PARTY<br>10/15/2024<br>_____ | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>HYLIFE FOODS L.P<br>623 MAIN STREET<br>NEEPAWA MB R0J 1H0<br>CANADA   |
| 2.72. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICES AGREEMENT<br>_____<br>_____<br>AS OF 01/01/2022<br>_____                      | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>HYLIFE LTD.<br>L'HORIZON<br>GUNSITE ROAD BRITTONS HILL<br>ST. MICHAELS 14027<br>BARBADOS                    |
| 2.73. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | LICENSE AGREEMENT<br>TRADEMARK LICENSE AGREEMENT<br>LICENSEE<br>7/16/1905<br>_____     | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>ICREST INTERNATIONAL LLC<br>200 N PACIFIC COAST HWY<br>EL SEGUNDO CA 90245                                  |

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.74. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** MEAT DISTRIBUTION
- Nature of debtor's interest** CONTRACT PARTY ICREST INTERNATIONAL LLC,  
200 N PACIFIC COAST HIGHWAY  
EL SEGUNDO CA 90245
- State the term remaining** 5/1/2025
- List the contract number of any government contract** \_\_\_\_\_
- 2.75. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** MUTRUCTION SERVICES, INCRVICES, INCIN.TRUCTION SERVICES, INCIL
- Nature of debtor's interest** CONTRACT PARTY INDUSTRIAL CONSTRUCTION SERVICES, INC.  
215 15TH STREET SOUTH  
ST JAMES MN 56081
- State the term remaining** 2/9/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.76. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** MECHANICAL
- Nature of debtor's interest** CONTRACT PARTY INTERSTATES, INC.  
1400 7TH AVE NE  
SIOUX CENTER IA 51250
- State the term remaining** 6/1/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.77. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** VISA PROCESSING AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY INUKSHUK, LLC  
1334 E CHANDLER BLVD  
PHEONIX AZ 85048
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.78. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** OPERATIONAL DIAGNOSTICS
- Nature of debtor's interest** CONTRACT PARTY ISAAC OPERATIONS LIMITED  
219 DUFFERIN ST SUITE 300A  
TORONTO ON M6K3J1  
CANADA
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.79. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** RECRUITING
- Nature of debtor's interest** CONTRACT PARTY JUDGE, INC.  
151 SOUTH WARNER ROAD SUITE 100  
WAYNE PA 19087
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.80. **Title of contract** LABOR AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** SECONDMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY KISH, SUZANNE  
Address Intentionally Omitted
- State the term remaining** 7/1/2023
- List the contract number of any government contract** \_\_\_\_\_
- 2.81. **Title of contract** LABOR AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** EXTENSION OF SECONDMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY KISH, SUZANNE  
Address Intentionally Omitted
- State the term remaining** 5/3/2023
- List the contract number of any government contract** \_\_\_\_\_
- 2.82. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ELECTRONIC EQUIPMENT
- Nature of debtor's interest** CONTRACT PARTY KONICA MINOLTA BUSINESS SOLUTIONS U.S.A. INC  
100 WILLIAMS DRIVE  
RAMSEY NJ 07446
- State the term remaining** 4/30/2021
- List the contract number of any government contract** \_\_\_\_\_
- 2.83. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CAR LEASE
- Nature of debtor's interest** LESSEE LA MOTORSPORTS  
703 1ST AVE N  
WINDOM MN 56101
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_

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- 2.84. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LAWN CARE
- Nature of debtor's interest** CONTRACT PARTY LAWN CRAFTERS, LLC  
20895 610TH AVE  
EAGLE LAKE MN 56024
- State the term remaining** 4/30/2023
- List the contract number of any government contract** \_\_\_\_\_
- 2.85. **Title of contract** SUPPLY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HOG SUPPLY AGREEMENT
- Nature of debtor's interest** \_\_\_\_\_ LES ELEVEURS DE PROCS DU  
QUEBEC  
555 BOULEVARD ROLAND-  
THERRIEN  
BUREAU 120  
LONGUEUIL QC J4H 4E9  
CANADA
- State the term remaining** 1Y TERM EXPIRED
- List the contract number of any government contract** \_\_\_\_\_
- 2.86. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** COMMUNICATIONS
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** 6/14/2023
- List the contract number of any government contract** \_\_\_\_\_ LIGHTHOUSE SERVICES, LLC  
630 FREEDOM BUSINESS CENTER  
DR., 3RD FLOOR  
KING OF PRUSSIA PA 19406
- 2.87. **Title of contract** SUPPLY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CHEMICAL SUPPLY
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** \_\_\_\_\_ LINDE INC.  
10 RIVERVIEW DRIVE  
DANBURY CT 06810
- List the contract number of any government contract** \_\_\_\_\_
- 2.88. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LOGISTICS
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** 12/31/2022
- List the contract number of any government contract** \_\_\_\_\_ LINEAGE LOGISTICS, LLC  
46500 HUMBOLT DR  
NOVI MI 48377

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| 2.89. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | INSURANCE AGREEMENT<br>EXCESS DIRECTORS AND OFFICERS AND COMPANY LIABILITY INSURANCE NO. 02-144-27-01<br><hr/> <hr/> <hr/> | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>LOCKTON COMPANIES LLP<br>138 HOUNDSDITCH<br>LONDON EC3A 7AG<br>UNITED KINGDOM  |
| 2.90. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | LABOR AGREEMENT<br>SECONDMENT AGREEMENT<br>CONTRACT PARTY<br>2025<br><hr/>   | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>LOGAN, KYLE<br>Address Intentionally Omitted   |
| 2.91. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>STAFFING<br>CONTRACT PARTY<br><hr/> <hr/>   | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>MAGNOW CORPORATION<br>377 VALLEY RD UNIT #2697<br>CLIFTON NJ 07013   |
| 2.92. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>REAL ESTATE<br>CONTRACT PARTY<br><hr/> <hr/>  | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>MAGSAYSAY GLOBAL SERVICES INC.<br>GF ANTONINO BUILDING, JORGE BOCOBO<br>CORNER T.M. KALAW STREETS<br>ERMITA<br>MANILLA 1000<br>PHILLIPINES |
| 2.93. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>CONSTRUCTION<br>CONTRACT PARTY<br><hr/> <hr/>   | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>MAREL SERVICE SOLUTIONS<br>17141 - 5505 N CUMBERLAND AVE<br>SUITE 307<br>CHICAGO IL 60656-1471   |

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.94. **Title of contract** LICENSE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LICENSE AGREEMENT
- Nature of debtor's interest** LICENSEE **MARUBENI AMERICAN CORPORATION**
- State the term remaining** 1/28/2021 **1331 CAPITAL AVENUE 4TH FLOOR**
- List the contract number of any government contract** \_\_\_\_\_ **OMAHA NE 69120**
- 2.95. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TECH SUPPLY
- Nature of debtor's interest** CONTRACT PARTY **MASTER ELECTRIC CO., INC.**
- State the term remaining** 1/21/2022 **8555 123RD STREET**
- List the contract number of any government contract** \_\_\_\_\_ **SAVAGE MN 55378**
- 2.96. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TECH SUPPLY
- Nature of debtor's interest** CONTRACT PARTY **MASTER ELECTRIC CO., INC.**
- State the term remaining** 2/21/2023 **8555 123RD STREET**
- List the contract number of any government contract** \_\_\_\_\_ **SAVAGE MN 55378**
- 2.97. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** TECHNOLOGY
- Nature of debtor's interest** CONTRACT PARTY **MASTER TECHNOLOGY GROUP**
- State the term remaining** \_\_\_\_\_ **7640 GOLDEN TRIANGLE DR.**
- List the contract number of any government contract** \_\_\_\_\_ **EDEN PRARIE MN 55344**
- 2.98. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** 401K PLAN
- Nature of debtor's interest** CONTRACT PARTY **MATRIX TRUST COMPANY**
- State the term remaining** \_\_\_\_\_ **717 17TH ST STE 1300**
- List the contract number of any government contract** \_\_\_\_\_ **DENVER CO 80202**

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| 2.99.  | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>CONSTRUCTION<br>CONTRACT PARTY<br>11/8/2021<br>_____                  | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>MIDSTATES BUILDERS, INC.<br>520 SOUTH GRAND AVE<br>SPENCE IA 51301                            |
| 2.100. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SURETY BOND<br>LIVESTOCK DEALER BOND - BOND NO. 905020320<br>_____<br>5/19/2023<br>_____   | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>MINNESOTA DEPARTMENT OF AGRICULTURE<br>625 ROBERT ST N<br>ST PAUL MN 55155                    |
| 2.101. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | LEASE<br>PROPERTY LEASE<br>LESSEE<br>8/21/2023<br>_____                                    | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>MINNESOTA INVESTMENT PROPERTIES, LLC<br>PO BOX 394<br>HERON LAKE MN 56137                     |
| 2.102. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | LEGAL SERVICES<br>ENGAGEMENT AGREEMENT<br>CONTRACT PARTY<br>_____<br>_____                 | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>MOSS & BARNETT, P.A.<br>AARON DEAN<br>150 S. 5TH STREET<br>SUITE 1200<br>MINNEAPOLIS MN 55402 |
| 2.103. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>AGREEMENT FOR PACKERS AND MARKETS<br>CONTRACT PARTY<br>_____<br>_____ | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>NATIONAL PORK PRODUCERS COUNCIL<br>PO BOX 10383<br>DES MOINES IA 50306                        |

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.104. **Title of contract** BUSINESS INSURANCE POLICY  
**State what the contract or lease is for** EXCESS LIABILITY POLICY NO. CH23EXRZ077Y8IV  
**Nature of debtor's interest** INSURED  
**State the term remaining** 1/1/2024  
**List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
 NAVIGATORS INSURANCE COMPANY  
 1 PENN PLAZA 32ND FLOOR  
 NEW YORK NY 10119
- 2.105. **Title of contract** SERVICE AGREEMENT  
**State what the contract or lease is for** WASTE MANAGEMENT  
**Nature of debtor's interest** CONTRACT PARTY  
**State the term remaining** 6/3/2024  
**List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
 NORTHSTAR RECYCLING COMPANY, INC.  
 94 MAPLE STREET  
 EAST LONGMEADOW MA 01028
- 2.106. **Title of contract** LEASE  
**State what the contract or lease is for** LEASE AGREEMENT  
**Nature of debtor's interest** LESSEE  
**State the term remaining** 7/31/2022  
**List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
 PEDERSEN, CHAD AND DAINTRI  
 Address Intentionally Omitted
- 2.107. **Title of contract** LEASE  
**State what the contract or lease is for** LEASE AGREEMENT  
**Nature of debtor's interest** LESSEE  
**State the term remaining** 7/31/2023  
**List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
 PEDERSEN, CHAD AND DAINTRI  
 Address Intentionally Omitted
- 2.108. **Title of contract** SUPPLY AGREEMENT  
**State what the contract or lease is for** HOG SUPPLY AGREEMENT  
**Nature of debtor's interest** CONTRACT PARTY  
**State the term remaining** 2Y TERM EXPIRED  
**List the contract number of any government contract** \_\_\_\_\_
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**  
 PEMBERTON GRAIN, LLC  
 1751 623RD AVENUE  
 PEMBERTON MN 56078

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| 2.109. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>SECURITY OFFICER AGREEMENT<br>CONTRACT PARTY<br>6/9/2022<br>_____  | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>PER MAR SECURITY & RESEARCH CORP.<br>PO BOX 4227<br>DAVENPORT IA 52808                              |
| 2.110. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>SECURITY OFFICER AGREEMENT<br>CONTRACT PARTY<br>6/22/2023<br>_____ | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>PER MAR SECURITY & RESEARCH CORP.<br>PO BOX 4227<br>DAVENPORT IA 52808                              |
| 2.111. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>SANITATION SERVICES<br>CONTRACT PARTY<br>11/28/2024<br>_____       | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>QUALITY VALUE EXPERIENCE<br>SANITATION TEAMS<br>205 S E 2ND STREET<br>PO BOX 436<br>GUYMON OK 73924 |
| 2.112. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>SUBSTANCE ABUSE<br>CONTRACT PARTY<br>UNTIL TERMINATED<br>_____     | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>QUEST DIAGNOSTICS CLINICAL LABORATORIES, INC.<br>500 PLAZA DR<br>SECAUCUS NJ 07094                  |
| 2.113. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>OFFICE SERVICES AGREEMENT<br>CONTRACT PARTY<br>_____<br>_____      | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>REGUS<br>7 CALLE 1 SUITE 204<br>GUAYNABO PR 00968   |

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| 2.114. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>CONSTRUCTION<br>CONTRACT PARTY<br>2/9/2022<br>_____         | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>ROBERT W. CARLSTORM CO., INC<br>1901 EXCEL DRIVE<br>MANKOTO MN 56001 |
| 2.115. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>CONSTRUCTION<br>CONTRACT PARTY<br>1/14/2022<br>_____        | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>ROBERT W. CARLSTORM CO., INC<br>1901 EXCEL DRIVE<br>MANKOTO MN 56001 |
| 2.116. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | LABOR AGREEMENT<br>SECONDMENT AGREEMENT<br>CONTRACT PARTY<br>9/30/2022<br>_____  | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>ROELS, GEOFF<br>Address Intentionally Omitted                        |
| 2.117. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | LEASE<br>PROPERTY LEASE<br>LESSEE<br>8/21/2023<br>_____                          | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>ROMSDAHL, ZACH<br>Address Intentionally Omitted                      |
| 2.118. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SUPPLY AGREEMENT<br>HOG SUPPLY AGREEMENT<br>CONTRACT PARTY<br>6/30/2023<br>_____ | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>SCHWARTZ FARMS<br>32296 190TH ST<br>SLEEPY EYE MN 56085              |

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|--------|---|--|--|
| 2.119. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>CONTRACTOR<br>CONTRACT PARTY<br>1/10/2023<br>_____  | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>SCHWICKERT'S TECTA AMERICA, LLC.<br>330 POPLAR STREET<br>MANKATO MN 56001                   |
| 2.120. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>CONTRACTOR<br>CONTRACT PARTY<br>_____<br>_____  | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>SCHWICKERT'S TECTA AMERICA, LLC.<br>330 POPLAR STREET<br>MANKATO MN 56001                   |
| 2.121. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br>BIO-PHARMACEUTICALS<br>CONTRACT PARTY<br>4/1/2023<br>_____                                    | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>SCIENTIFIC PROTEIN LABORATORIES LCC<br>700 EAST MAIN STREET<br>WAINAKEE WI 53597            |
| 2.122. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | LEGAL<br>LEGAL<br>CONTRACT PARTY<br>_____<br>_____   | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>SKILLWORK LLC<br>3738 S 149TH ST # 111<br>OMAHA NE 68144                                    |
| 2.123. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | OPERATING AGREEMENT<br>OPERATING AGREEMENT<br>CONTRACT PARTY<br>AS OF 3/27/2023 NO EXPIRATION DATE LISTED<br>_____ | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br>SKYLINE INTERNATIONAL CORPORATION<br>QUARTERMILE ONE<br>EDINBURGH EH3 9EN<br>UNITED KINGDOM |

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.124. **Title of contract** BUSINESS INSURANCE POLICY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** WORKERS' COMPENSATION POLICY NO. 1000004012
- Nature of debtor's interest** INSURED STARR INDEMNITY & LIABILITY COMPANY  
399 PARK AVENUE  
2ND FLOOR  
NEW YORK NY 10022
- State the term remaining** 1/1/2024
- List the contract number of any government contract** \_\_\_\_\_
- 2.125. **Title of contract** \_\_\_\_\_ **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** \_\_\_\_\_
- Nature of debtor's interest** \_\_\_\_\_ STEARNSMARTIN LLC  
1255 HWY 15 SOUTH  
FAIRMONT MN 56031
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.126. **Title of contract** LEGAL SERVICES **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ENGAGEMENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY STINSON LLP  
RENEE MUELLER STEINLE  
50 S. SIXTH STREET  
SUITE 2600  
MINNEAPOLIS MN 55402
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.127. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CONSTRUCTION
- Nature of debtor's interest** CONTRACT PARTY STOVER & ASSOCIATES, INC.  
P.O. BOX 2056  
STILLWATER OK 74076
- State the term remaining** 2/28/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.128. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** WASTEWATER
- Nature of debtor's interest** CONTRACT PARTY STOVER & ASSOCIATES, INC.  
P.O. BOX 2056  
STILLWATER OK 74076
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.129. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** WASTEWATER TREATMENT
- Nature of debtor's interest** CONTRACT PARTY **STOVER & ASSOCIATES, INC.**
- State the term remaining** \_\_\_\_\_ **P.O. BOX 2056**
- List the contract number of any government contract** \_\_\_\_\_ **STILLWATER OK 74076**
- 2.130. **Title of contract** WASTEWATER CHARICTARIZATION STUDY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** \_\_\_\_\_
- Nature of debtor's interest** CONTRACT PARTY **STOVER & ASSOCIATES, INC.**
- State the term remaining** 1/1/2022 **P.O. BOX 2056**
- List the contract number of any government contract** \_\_\_\_\_ **STILLWATER OK 74076**
- 2.131. **Title of contract** SERVICES AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** \_\_\_\_\_
- Nature of debtor's interest** CONTRACT PARTY **STOVER & ASSOCIATES, INC.**
- State the term remaining** AS OF 02/28/2022 **P.O. BOX 2056**
- List the contract number of any government contract** \_\_\_\_\_ **STILLWATER OK 74076**
- 2.132. **Title of contract** \_\_\_\_\_ **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** \_\_\_\_\_
- Nature of debtor's interest** \_\_\_\_\_ **T AND M DEVELOPMENT LLC**
- State the term remaining** \_\_\_\_\_ **5905 BELLEVILLE RD**
- List the contract number of any government contract** \_\_\_\_\_ **BELLEVILLE MI 48111-1119**
- 2.133. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY LEASE
- Nature of debtor's interest** LESSEE **T&M DEVELOPMENT, LLC.**
- State the term remaining** 3/21/2023 **1955 1ST AVENUE**
- List the contract number of any government contract** \_\_\_\_\_ **WINDOM MN 56101**

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.134. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** FIRE INSPECTION
- Nature of debtor's interest** CONTRACT PARTY THE FIRE GROUP INC  
833 SW 3RD STREET SUITE 4  
NEW BRIGHTON MN 55112
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.135. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** FIRE INSPECTION
- Nature of debtor's interest** CONTRACT PARTY THE FIRE GROUP INC  
833 SW 3RD STREET SUITE 4  
NEW BRIGHTON MN 55112
- State the term remaining** \_\_\_\_\_
- List the contract number of any government contract** \_\_\_\_\_
- 2.136. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** FIRE MAINTENANCE
- Nature of debtor's interest** CONTRACT PARTY THE FIRE GROUP, INC.  
833 3RD STREET SW SUITE 3  
NEW BRIGHTON MN 55112
- State the term remaining** 9/2/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.137. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** FIRE MAINTENANCE
- Nature of debtor's interest** CONTRACT PARTY THE FIRE GROUP, INC.  
833 3RD STREET SW SUITE 3  
NEW BRIGHTON MN 55112
- State the term remaining** 9/2/2022
- List the contract number of any government contract** \_\_\_\_\_
- 2.138. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY LEASE
- Nature of debtor's interest** LESSEE TORKELSON, CAROLINE  
Address Intentionally Omitted
- State the term remaining** 12/31/2022
- List the contract number of any government contract** \_\_\_\_\_

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.139. **Title of contract** \_\_\_\_\_ **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** \_\_\_\_\_
- Nature of debtor's interest** \_\_\_\_\_ **TORKELSON, CAROLINE**
- State the term remaining** \_\_\_\_\_ **Address Intentionally Omitted**
- List the contract number of any government contract** \_\_\_\_\_
- 2.140. **Title of contract** SURETY BOND **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ERISA FIDELITY BOND - BOND NO. 107734390
- Nature of debtor's interest** \_\_\_\_\_ **TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA**
- State the term remaining** \_\_\_\_\_ **385 WASHINGTON STREET**
- List the contract number of any government contract** \_\_\_\_\_ **MAIL CODE 9275-NB03F**
- 2.141. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY LEASE
- Nature of debtor's interest** LESSEE **TWIN CITY LODGING, LLC**
- State the term remaining** 1/1/2024 **2401 PRIOR AVE NORTH**
- List the contract number of any government contract** \_\_\_\_\_ **ROSSVILLE MN 55113**
- 2.142. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** PROPERTY LEASE
- Nature of debtor's interest** LESSEE **TWIN CITY LODGING, LLC**
- State the term remaining** 7/16/1905 **1111 RANGE STREET**
- List the contract number of any government contract** \_\_\_\_\_ **NORTH MANKATO MN 56003**
- 2.143. **Title of contract** SURETY BOND **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** LIVESTOCK DEALER BOND - BOND NO. 905020320
- Nature of debtor's interest** \_\_\_\_\_ **U.S. DEPARTMENT OF AGRICULTURE**
- State the term remaining** 5/19/2023 **1400 INDEPENDENCE AVENUE SW**
- List the contract number of any government contract** \_\_\_\_\_ **WASHINGTON DC 20250**

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- 2.144. **Title of contract** \_\_\_\_\_ **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** \_\_\_\_\_
- Nature of debtor's interest** \_\_\_\_\_ VAN TOL PROPERTIES LLC
- State the term remaining** \_\_\_\_\_ 1050 MARSH ST
- List the contract number of any government contract** \_\_\_\_\_ MANKATO MN 56001
- 
- 2.145. **Title of contract** LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** RESIDENTIAL LEASE
- Nature of debtor's interest** LESSEE VAN TOL PROPERTIES, LLC
- State the term remaining** 1/31/2022 1050 MARSH STREET
- List the contract number of any government contract** \_\_\_\_\_ MANKATO MN 56001
- 
- 2.146. **Title of contract** REAL ESTATE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CASH RENT AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY VEENKER, SCOTT
- State the term remaining** 3/1/2023 Address Intentionally Omitted
- List the contract number of any government contract** \_\_\_\_\_
- 
- 2.147. **Title of contract** SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** COMMUNICATIONS
- Nature of debtor's interest** CONTRACT PARTY VERIZON WIRELESS INC
- State the term remaining** \_\_\_\_\_ 1095 6TH AVE
- List the contract number of any government contract** \_\_\_\_\_ NEW YORK NY 10036
- 
- 2.148. **Title of contract** SUPPLY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** HOG SUPPLY AGREEMENT
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** 4/1/2023 WAKEFILED PORK, INC.
- List the contract number of any government contract** \_\_\_\_\_ 2850 HIGHWAY 60 EAST
- WINDOM MN 56101

Debtor **HyLife Foods Windom, LLC**Case number (if known) **23-10521**

- |        |   |  |  |
|--------|---|--|--|
| 2.149. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SERVICE AGREEMENT<br><br>MANAGEMENT<br><br>CONTRACT PARTY<br><br>6/1/2026<br><br>_____       | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br><br>WASTE MANAGEMENT OF MINNESOTA<br>W132 N10487 GRANT DRIVE<br>GERMANTOWN WI 53022 |
| 2.150. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SUPPLY AGREEMENT<br><br>PACKAGING SUPPLY<br><br>CONTRACT PARTY<br><br>_____<br>_____         | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br><br>WEST ROCK CP, LLC<br>1000 ABERNATHY ROAD NE<br>ATLANTA GA 30328                 |
| 2.151. | <b>Title of contract</b><br><b>State what the contract or lease is for</b><br><b>Nature of debtor's interest</b><br><b>State the term remaining</b><br><b>List the contract number of any government contract</b> | SUPPLY AGREEMENT<br><br>PACKAGING SUPPLY<br><br>CONTRACT PARTY<br><br>6/11/2024<br><br>_____ | <b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b><br><br>WEST ROCK CP, LLC<br>1000 ABERNATHY ROAD NE<br>ATLANTA GA 30328                 |

**Fill in this information to identify the case:****Debtor name:** HyLife Foods Windom, LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 23-10521☐ Check if this is an amended filing

Official Form 206H

**Schedule H: Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Does the debtor have any codebtors?**

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G.** Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1. CANWIN FARMS, LLC	2850 HIGHWAY 60 EAST WINDOM MN 56101	COMPEER FINANCIAL FLCA	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2. CANWIN FARMS, LLC	2850 HIGHWAY 60 EAST WINDOM MN 56101	COMPEER FINANCIAL PCA	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

**Fill in this information to identify the case:****Debtor name:** HyLife Foods Windom, LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 23-10521Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 5/25/2023  
MM/DD/YYYY

x

/s/ Howard Siemens

Signature of individual signing on behalf of debtor

Howard Siemens  
Printed name

Vice-President & Secretary  
Position or relationship to debtor